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ABSTRACT

Seven author contributed chapters provide information for designing and administering an early childhood education program to Black exceptional children, taking into consideration the issues such as barriers and issues as growth in mental health problems, diversity of backgrounds, and need for successful parent participation. Chapters have the following titles and authors: "Considerations in Orchestrating an Early Childhood, Special Education Program--A Black Administrator's Perspective" (L. Fitts): "Curriculum and Instructional Strategies" (H. Hankerson): "Serving Parents and Families of Young Black Children with Special Needs" (J. Bickerstaff): "Personnel Development" (J. Birckhead, B. Coppock, Jr.): "Issues in Assessment" (L. Olion): "Mental Health Problems and the Black Child--Issues of Incidence, Treatment and Prevention" (H. Myers): and "Focus for the Future" (E. Jackson). Papers are designed to present alternatives for intervening with Black children and their families, present strategies useful for Black professionals who are in leadership roles such as planning and administering early childhood programs for exceptional children, and present a synthesis of information currently being employed in addressing issues related to the Black exceptional children and his/her family. Appended are an annotated bibliography of books and background readings for and about Black children and Black Americans, and descriptive information on three resource agencies (National Black Child Development Institute, National Council for Black Family and Child Development, and Black Caucus of Special Educators). (SB)

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The Young Black Exceptional Child

Providing Programs and Services

Edited by Elouise Jackson

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FOREWORD

by THEODORE R. DRAIN

Special educators have long recognized the importance of early intervention in promoting the growth and potential of children with special needs. As Black educators we are even more aware of the significant difference a good beginning in education can make for the young Black exceptional child, birth to five years, who often faces additional barriers to a successful school experience.

These barriers or issues are ones we come in contact with daily in our efforts to plan educational services:

- We are faced constantly with the problem of the large numbers of young Black children who are identified as mentally handicapped and the low numbers who are recognized for their giftedness.
- We see an alarming growth in mental health problems, especially among those Black children from urban, poor communities.
- We know the diversity of backgrounds from which these children come and recognize how this diversity contributes to their unique needs.
- We are keenly aware that special training of personnel to work with these children is necessary and that such training requires the expertise of persons who understand their distinctive problems.
- We know that special programming and planning are essential if our Black handicapped children are going to receive the education to which they are entitled.
- We continually recognize the broad implications of parent involvement in service delivery and the need to investigate avenues of successful parent participation more thoroughly.

The Young Black Exceptional Child is a timely publication designed to provide some answers to the problems we face and to stimulate our creativity and imagination as we take the responsibility of designing special services in

this area.

It addresses the inequalities in assessment, reevaluates the total assessment procedure and proposes alternatives for future nonbiased ability indicators. In the process we learn why current instruments are inappropriate and how new legislation has mandated changes.

It takes a look at the real world of the young Black child in an effort to identify solutions to mental health problems. The cause of the Black child's difficulties in this area cannot simply be attributed to deficiencies in the child, family or community.

It challenges Black colleges--the Traditional Black Institutions--to take advantage of their unique position to conceptualize and develop innovative training programs. These should include new components, such as identifying methods for building effective relationships with Black parents.

And, very appropriately, it provides information for designing and administering an early childhood special education program, taking into consideration the issues and challenges raised within these pages. Synthesizing the information we have and gaining new knowledge are two of the most important processes used by the Black administrator.

Not only will this publication become an invaluable resource for Black educators involved in research and in planning and providing services to preschoolers, but it will be a useful document for their white counterparts in these same areas who seek an understanding of the issues.

We are in a time when the value of early intervention for all exceptional children is becoming accepted as a most vital area of emphasis. It is our responsibility to our profession and to our young Black children to be in the forefront of this movement to ensure them an appropriate beginning that has been designed to meet their very special needs.

The Young Black Exceptional Child

INTRODUCTION

by ELOUISE JACKSON

The phrase, "You cannot return from where you've never been," suggests the predicament of many people working with Black children who are handicapped. These people, often well intentioned and aware of many of the important issues confronting the handicapped child, have blind spots in critical areas with Black children because they have never experienced the societal circumstances in which these children live. They literally cannot return to these circumstances for a frame of reference when working with these children because they have never been through the circumstances.

But the problem is not limited to non-Black professionals. Sometimes Black professionals have problem areas because they lack information or experience in an area crucial to working with these children.

We hope that the information we have provided in the pages of this text will give all of these people the special perspective they need for their work. We have tried especially to do three things here:

1) Present alternatives for intervening with Black children and their families that are based on the culmination of our experiences as Black professionals.

2) Present strategies useful for Black professionals who are in leadership roles such as planning and administering early childhood programs for exceptional children.

3) Present a synthesis of the information currently being employed in addressing issues related to the Black exceptional child and his or her family.

To gain from this document the kind of understanding of the issues surrounding services to Black handicapped children and to use the information as intended, the reader must begin with a certain attitude--one that is founded on a willingness to consider the issues within the terms they are presented. This is an area where it is too easy to make snap judgments without sufficient

knowledge and forethought. We hope our readers will try to learn--through this book--more about the nature of circumstances facing Blacks in the American society, and particularly, in the field of special education.

In addition to starting with a fresh attitude, we hope our readers will carefully consider our approach to the issues. That is, we have asked the following questions throughout each area covered in the YOUNG BLACK EXCEPTIONAL CHILD:

1) What caused and perpetuates the circumstances that have had an unfavorable impact on the lives of Black exceptional children and their families?

2) What impact do these circumstances have?

3) What steps should be taken to ameliorate present circumstances?

The circumstances we are talking about include the various day-to-day encounters that Blacks have with others in the society--encounters in which the basic human need for dignity is sometimes subtly and sometimes ostensibly violated. Obviously, it is more difficult to talk or write about subtle encounters that over time demean a child or shatter that child's sense of self-worth than it is to write about differences in language or environment that affect learning. But until we understand the impact of these subtle encounters (psychologically, academically and socially) and seek more actively to eliminate their very existence, we will not understand the Black experience and its relationship to learning. We must broaden our understanding and go beyond the concrete differences between one group and another to those more abstract issues that limit potential and growth.

We hope that this book will inspire Black professionals to continue delineating the nature of the Black experience and its impact upon Black children and their families. Our audience as educators--which includes decision- and policy-makers responsible for developing, implementing and/or

expanding services for the Black exceptional child and his or her family--must come to understand our experiences fully and poignantly.

We also hope that our readers will be stimulated to rethink their beliefs and practices as they relate to the many issues addressed here. You may not be able to return from where you've never been, but that does not mean you cannot come to understand where others have been.

CHAPTER 1

CONSIDERATIONS IN ORCHESTRATING AN EARLY CHILDHOOD, SPECIAL EDUCATION PROGRAM: A BLACK ADMINISTRATOR'S PERSPECTIVE

by LEONARD D. FITTS

The Black administrator, for a number of complex social reasons, is faced with challenges in managing an early childhood special education program that are often not confronted by his or her white counterpart. More than any person in the program, the administrator is responsible for ensuring its harmonious operation. If he or she fails to orchestrate people and activities well, the project will probably fail.

In this chapter, we are interested in examining the problems particular to Black administration. We will begin by discussing an administrative approach in special education programs. Then we will consider the characteristics which a successful administrator should have or develop to work within this process. Next, we will turn to an examination of seven potential crisis areas in terms of an administrator's responsibilities. We will conclude with a discussion of administrative practices which may have the longest-term benefits for children in special education.

Administration in Special Education

The core administrative process in early education projects essentially consists of three activities:

1) Establishing objectives
2) Directing attainment of objectives, and
3) Measuring results.

These activities are repeated over and over in the course of a project's life. Each time results are evaluated, new objectives are set. Often, when objectives are being implemented, the need for better or at least different objectives becomes clear. So the administrator is continuously faced with decisions regarding the course the project is taking--whether it is on target or should be changed.

To be successful in this venture, the administrator must be an adept orchestrator. In this chapter, when the word orchestrate is used, it refers to the arts of organizing, planning, developing, budgeting and goal-setting which are necessary to achieve desired objectives. It is the work which the administrator does as he or she seeks to get results through other people.

Orchestrating is conducted at any organizational level where one person must plan, guide, direct and control the activities of others to achieve desired goals. The school superintendent orchestrates the entire educational setting. The director of various units is responsible for orchestrating activities within those units. The project director or administrative assistant orchestrates resources at the project.

Everyone who seeks to get results through other people must use what we call the seven elements of orchestrating (obtaining/synthesizing information, planning, decision-making, organizing, communicating, motivating, evaluating). But before turning to these, let's look at the qualities that are important for an administrator to develop before beginning his or her work.

Characteristics of a Successful Administrator

There are many qualities which may rightfully be listed in an "ideal profile of characteristics" for an administrator. They include efficiency, fairness, competence, interpersonal adeptness, integrity, cleverness, flexibility, resourcefulness, etc. We are concerned here, not with a complete profile, but with those qualities which may be particularly

critical to success for a Black administrator.

Alternatives. The Black administrator is often a new administrator. This means he or she may not be accustomed to looking for a multiplicity of alternative solutions to problems. Of course, the ability to consider alternatives depends on the ability to see or find alternatives. Because resources, both financial and professional, are often limited around minority projects, it is critical for the "seeking of alternatives" to become second nature to a Black administrator.

Credibility. Before even beginning the work of a project, racial stereotypes may interfere with the administrator's ability to function. It is crucial that he or she develop an image of credibility with both the Black and white community. Some of the ways this may be done are:

1) Maintain a strict set of professional standards for your work with the community and with agencies. Be absolutely fair--as honest and objective as you can be--in working with others.

2) Work to establish rapport with both Blacks and whites; this may involve attending community functions such as cakewalks, going to churches, attending civic meetings, etc.

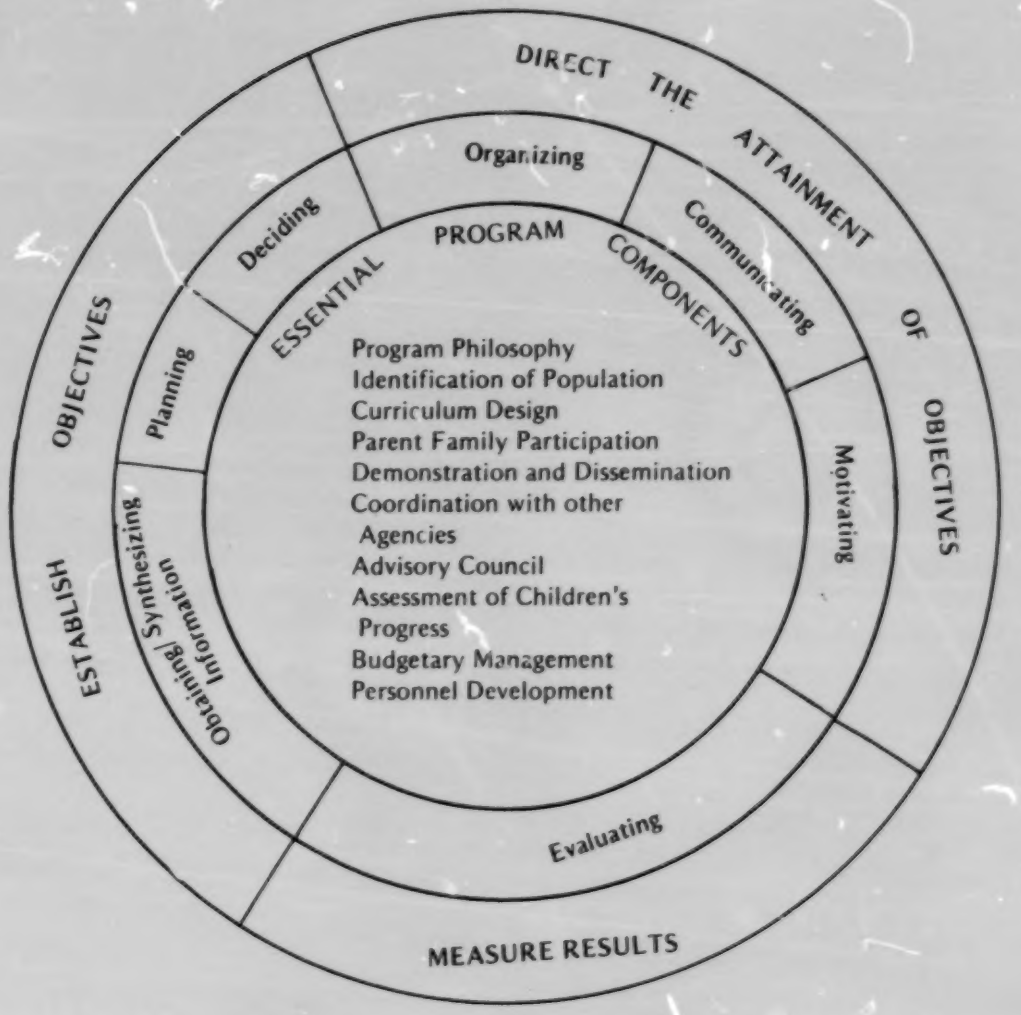
3) Develop a base of knowledge about your environment; learn which agencies may help with planning or with resources or with services.

Confidence. Nothing is more destructive to administration than a lack of confidence in one's ability to make decisions. Develop confidence or bolster what you have by allying yourself with people you trust--for example, other successful project administrators. Learn from them and let them help you.

Also be willing to trust your own instincts about what is needed for your work. There are some things a minority administrator will always be in a better position to know intuitively about minority children than a white administrator. With confidence, you will make more accurate decisions.

FIGURE 1

Administrative Responsibilities in an Early Childhood, Special Education Program



Administrative Responsibilities

As you will see by reviewing Figure 1, there are ten major program components which the administrator must oversee. These components reflect those used by the Camden Public School System. The seven activities in the circle immediately surrounding these components are the ways the administrator will use to make sure the components function properly. In the following paragraphs, we will review the problems often encountered with each of the seven activities, and offer solutions.

Obtaining/Synthesizing Information. Without information, a program cannot really be planned. Information is needed to show justification for the program (the population to be served, available resources, community consciousness and so on). But there are problems a Black administrator may have in getting some of this information.

1) It is especially difficult to get information on funding. Unfortunately, many government publications filter down to projects after funds have been allocated. Several ways to combat this lack of information include:

--Establish ties with state departments of education.

--Get on boards of various early childhood programs such as day care.

--Increase attendance at professional meetings [such as the local chapter of the Council on Exceptional Children (CEC)].

--Develop, independently, a knowledge base that consists of information on a variety of resources.

2) It is difficult to get information on the community and children to be served. Many times this may happen because of resistance to a Black administrator as a "professional." Combat this problem by:

--Being conscious of political realities.

--Being part of the community in terms of its activities and goals.

--Listening to individuals as well as groups to get information on handicapped children in the community and the kind of program needed.

--Being willing to work with the school district in providing services to children.

3) It is difficult to establish links with other groups. Without ties to groups in the community and in the profession, it is impossible to stay abreast of new developments in the field. The isolation that a Black administrator may feel can be reversed by:

--Subscribing to publications that are pertinent to the program (Journal of Special Education, CEC publications, etc.)

--Increasing attendance at local meetings and becoming involved by holding offices within organizations.

--Forming liaisons with other Black administrators in the state.

--Offering support to help various professional, civic and other organizations realize their goals.

4) It is difficult to get information from parents. Often the importance of keeping medical records and information concerning a child's health or developmental history is not understood by parents. Often, too, the knowledge that many parents may have about normal child growth and development may not warrant keeping information for future reference or use. This problem can be ameliorated by:

--Modifying the information-gathering process and working through parents to tap other primary sources of data such as hospitals, clinics, doctors and others.

--Improving interviewing techniques (e.g. probe parents by getting them to provide you with examples about major events in the child's life such as the parent's reaction when the child said his or her first word, who was present when the event occurred, etc.).

Planning. The problems a Black administrator often has in planning occur because he or she is a new administrator, unfamiliar with the scope of a leadership position. He or she is unacquainted with the tasks that need to be completed before beginning to write schedules and set objectives or

with the particular kind of practicality and imaginative use of information required to manage effectively.

1) The Black administrator is often unfamiliar with planning as a management process. To combat the problem:

--Establish ties with an experienced and successful administrator.

--Make sure enough information is available to allow rational planning before beginning. For example: What is the availability of resources? What is the school district's record in working with parents and their handicapped children? What is the present status of service delivery in the system? What goals have been set for early childhood special education programs?

--Be absolutely clear--in writing--about goals and objectives for the program, how they will be implemented, and how they will be measured.

--Be absolutely clear--in writing--about the function of each component of the program so that a gap or duplication in services does not occur.

--Utilize your advisory board as a source of information and different perspectives.

--Establish policies for managing personnel, and schedule conferences for planning with staff at every level: bus drivers and custodians through program administrators. Also, use staff to help in solving planning dilemmas.

2) It is difficult to establish long-range goals because there are so many immediate crises to respond to. To combat this problem:

--Realize the value of planning and developing programs. For example, the planning and development of a model program are more likely to result in funds for continuing the program and its work after three years than concentrating primarily on day-to-day service delivery.

--Do everything possible to get more funding at the outset of the program. Begin long-range planning.

--Use your advisory board's expertise to decide on appropriate long-range goals.

3) There is little information available on Black programs. This is frequently the case for programs in your area and nationally. Without research information on successful educational practices within Black programs, for instance, it is difficult to plan effectively because you do not know of

other methods and strategies employed in similar settings, what the latest is in minority education, etc. The suggestions in the "Obtaining/ Synthesizing Information" section also apply here.

Decision Making. Clearly the decisions to be made in a program depend on the place "in time" of the program (for example, planning, service delivery, evaluation, outreach training, etc.). While the particular decisions to be made vary according to the stage of the program, problems in the way decisions are made generally stay the same from the program's beginning to end. The style of the administrator--informed by his or her legal, moral, ethical, social, and religious orientation--affect his/her effectiveness at decision making as do the social, economic and educational environments; as well as other variables. The particular problems faced by Black administrators relate to experience.

1) The Black administrator often has little experience in making administrative decisions which will affect many people. In addition to the suggestions for gathering information and gaining support from experienced administrators, it is important for the new administrator to:

--Learn to see alternatives.

--Free him or herself from tradition, past practices, and assumptions of others insofar as possible when evaluating alternatives.

--Read.

2) The Black administrator is frequently inexperienced in the use of computers as an aid in decision making. Data about environment, clients, etc., are usually stored in computers, which are rapidly becoming one of the few realistic ways to synthesize and interpret large amounts of data. The administrator must learn to use this tool to keep up with his/her profession. To correct this situation:

--Seek basic training at local universities.

--Enlist the aid of administrators familiar with computer-processing techniques.

Organizing. Dealing with people, time and resources to achieve certain objectives takes organization. Perhaps the major problems faced by a Black administrator in regard to this activity concern personnel. It is difficult to get the right mix of people to execute the operation of the program and remain with the project over time.

1) It is difficult to get a culturally mixed staff that meets the needs of the project. Sometimes it is impossible to get the specialist needed because of salaries or because Black specialists are in short supply. Once staff is lined up, it is oftentimes hard to keep them due to the demands for minority professionals in the field. To remedy this situation:

--Work to achieve an attractive salary/benefits arrangement.

--Build and maintain a current file of applicants and include therein a minority talent bank (people met at minority meetings, etc.).

--Provide continuous inservice training for all program staff including paraprofessionals.

--Use trained paraprofessionals from the community and seek alternatives for further professional training.

2) Frequently the administrative level of the Black professional is alienating to staff. Sometimes there are racial barriers for whites because they are not used to the Black professional being in a leadership position. Other more subtle barriers may exist for Blacks who work with a Black administrator. The Black administrator with both white and Black staff may require additional time for developing working relationships. Both groups may prove difficult for the Black manager. The suggestions offered in the section entitled "Characteristics of a Successful Administrator" apply here aptly.

Communicating. Some people feel that this is the most important of all the skills a manager possesses and uses. Barnard (1938) wrote, "...the first function of an executive is to develop and maintain a system of communication." Perhaps the most problematic issue in this area for the Black administrator involves--in addition to all of the previous issues discussed--establishing two-way communication.

1) The Black administrator often finds it difficult to get feedback on his or her work. Methods for changing this situation include:

--Use personal, staff and community conferences.

--Attend community group meetings.

--Be available to anyone who wishes to talk.

--Use a suggestion box.

2) The Black administrator finds it difficult to establish the proper communication tone. In many Black programs, the staff sees the administrator as a problem solver who can be helpful for matters beyond the scope of the project. This can cost time and lead to other problems. To avoid such instances:

--Establish ground rules for communication (e.g., focus on goals and objectives of the project, keep small talk to an absolute minimum, etc.)

--Provide all people with information at the same time and on time.

Motivating. The Black administrator's staff will possibly include a mixture of persons from varying backgrounds and thus reflect a wide range of work experiences, expectations and work styles. For some of these people, the project position is their first experience in such a job. It may be difficult to achieve maximum performance because their work experiences are limited or they are not used to working in an early childhood education environment. In short, they may find their new roles difficult to perform.

1) It may be difficult to help people feel the degree of responsibility needed to execute the work properly. To combat this problem:

--Help people be proud of their part in the project by using memos of praise, awards for exceptional performance, and letters of recognition.

--Familiarize everyone with the goals and philosophy of the project and the vital role that each person plays.

--Make each person feel like he or she belongs by involving everyone in decision making, presentations, open house, group activities, etc.

Evaluating. This activity is always one of the most difficult in any project. Each of the ten elements in the center of the circle in Figure 1 (p. 10) has to be evaluated eventually, which adds up to a huge amount of work for very few people. The problems often faced by many Black administrators are related to the fact that they are often oriented toward service delivery--not model development, efficacy data, and the like. This makes it difficult to plan for evaluation.

1) Many Black administrators often fail to develop an evaluation design (what and how to evaluate). Like many other professionals, they too may feel inadequate in the area of evaluation. Perhaps the best ways to address this issue are:

--Recruit competent evaluators for staff.

--Request from the Office of Special Education training in this area for minority leaders.

2) The Black administrator often does not obtain sufficient data for evaluation. Among the best ways to deal with this problem, in addition to those listed under number 1) above, are:

--Develop a relationship with an experienced, successful project director who can assist by helping you learn to collect the proper data.

--Establish among staff the importance of data collection, help them to develop a data collection system and monitor its implementation.

3) The Black administrator often does not place high priority on evaluation. Thus he or she will not acquire a competent, trained evaluator. This happens primarily because he or she is often director of what is usually considered a service project. The Black manager may not consider evaluation a high priority. Moreover, he/she is usually not research oriented. There are several ways to rectify the situation:

--Encourage doctoral students to look at your program as a source of data for their dissertation.

--Plan with another project to compare the data from each project.

--Identify people in the local community and at places like Educational Testing Service and Research for Better Schools who might have an interest in your program.

--Put money into the budget for evaluation.

Administrative Practices: A Conclusion

Clearly, in all of the activities above, we have found areas in which the Black administrator may face difficulties in orchestrating an early childhood program for children with special needs. If the problems are not resolved, the ultimate result will be that children will not be getting the services they need. This is a complex endeavor. To establish good services ultimately, we must concentrate now on program development. But appropriate services should invariably be the outcome of a program whose approach is well defined and operational.

Orchestrating such a program is the primary task at hand. To carry out such a charge is a complex effort indeed; it is compounded if you are a minority leader in a society that is just beginning to accept and respect minority leadership. The solutions suggested to strengthen the Black leadership position include: get more training in schools, from colleagues, and other sources; pair yourself with an experienced preschool

administrator; petition the Office of Special Education for workshops and other help; and enlist the aid of the community in supporting your program and its goals.

Only with more knowledge and experience will we build better services for our children and for all children.

REFERENCE

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CHAPTER 2

CURRICULUM AND INSTRUCTIONAL STRATEGIES

by HENRY E. HANKERSON

UNDERSTANDING THE YOUNG BLACK EXCEPTIONAL CHILD: AN OVERVIEW

Preschool programs must continue to be developed and regularly revised to meet the educational needs of young children having various cultural and ethnic origins. These diverse groups of young children live under educational, social and economic conditions different from the children of more affluent people in the American society. The young Black exceptional child is characteristic of this group. He or she is faced with a two-fold disadvantage: being a minority (Black) and having a handicapping condition. He or she presents a challenge to educational programs to provide curriculum and instruction that will encourage learning.

The challenge is underscored by the fact that the young Black exceptional child presents both the special characteristics of a diverse cultural group and his or her own individual differences within that group. These differences include the sociopsychological aspects of the child's background. The young Black exceptional child may fit into the following profile:

> This child is a member of an ethnic minority. He or she comes from a broken home, a single parent home, a foster home or even a relatively stable family home. The child has had experiences unique to the Black culture which means he or she has ideas about self and others different from the majority culture, and has different value constructs about life, education and happiness. He or she also has special physical and/or mental needs.

Therefore, the child's needs (abilities and disabilities) must be approached in terms of the "child as an individual" ("intra-individual"); not in terms that force comparison of the child with his peers (Bardwell, Kreig, and Olion, 1973).

While all of these diversities must be given consideration in planning, programming, and evaluating curriculum and instruction, the key rationale for providing services and programs for the young Black exceptional child must be this: Caregivers must be qualified and capable of understanding and accepting this child as a child, first, with the same basic needs, feelings, attitudes and interests as any other child. The handicapping condition(s) is just one aspect of the child's total spectrum of strengths and weaknesses. The child with a special need should get additional help in order to attain his/her full potential.

Many ways exist for stimulating, teaching and caring for children with special needs so that they attain their maximum potential and live a productive life that fits their abilities and needs. This chapter presents information on how to design and modify curriculum and instruction to promote better preschool education for young Black exceptional children, as well as children in general. The goal of this chapter is not an exhaustive or exclusive exemplary model for curriculum and instruction, but rather information, materials, resources, and strategies for preschool special educators, parents and others to use in initiating, ameliorating, and implementing curriculum and instruction in programs for young Black exceptional children.

The following elements are important ways of encouraging and cultivating an appreciation of ethnic heritage in your curriculum and instructional program:

1) Have a rationale for your teaching and learning process for these children.

2) Have a purpose for the particular programs.

3) Coordinate goals and objectives for the growth and development of young children in the program with teaching methods and techniques.

4) Use a system for measuring the outcomes of curriculum and instruction in behavioral terms.

5) Devise strategies (including parent and community involvement) for using teaching at the preschool level to ready the child to eventually function well enough to enter the mainstream of society.

Building curriculum and teaching, then, must be approached from a Black perspective. To aid this process, we will present a two-fold perspective on curriculum and instructional strategies: (1) Goals of Early Childhood Education and Intervention Strategies: An Integral Part of the Developmental Curriculum; and (2) Effective Child and Classroom Management: Focusing on Teaching Objectives Rather Than On Discipline and Control. Each of these topics will be presented along with examples of principles and features that are germane to curriculum areas and handicapping conditions of the young Black exceptional child.

PART 1
GOALS OF EARLY CHILDHOOD EDUCATION AND INTERVENTION STRATEGIES: AN INTEGRAL PART OF THE DEVELOPMENTAL CURRICULUM

Before curriculum is planned, goals must be established in order to determine what is to be accomplished. For the purposes of designing and modifying curricula and instructional strategies for the young Black exceptional child, let's use the basic assumption that "our goals mandate each child live a happy childhood, reach his/her potential, and become a happy, fully functioning adult" (Hildebrand, 1971). The primary theme of this chapter makes it necessary to include certain guidelines for attaining this goal. First, caregivers must understand and be aware of those aspects of the Black child's life -- culture and heritage -- that bring happiness to him or her. Second, caregivers must screen, assess, and diagnose the "whole" child's growth and development so that emphasis is not placed solely on the child's disability. Development occurs concurrently in physical, emotional, social, and intellectual areas and requires emphasis on all of these areas for the child to obtain, maintain and strive toward his or her potential. Therefore, for this special child who happens to be Black,

educational planning must initially fit curriculum and instruction to each child's abilities and disabilities (intra-individual differences) (Kirk, 1972). Third, in order that this child may live a productive life from childhood to adulthood and thereafter, educational programs must be developed and improved and caregivers trained to implement curriculum and instructional strategies that are congruent with the child's needs, abilities, disabilities, disadvantages, and advantages. Information, therefore, will be presented here to assist the teachers, parents, and other caregivers in reaching these goals.

The goals of early childhood education as defined by Hildebrand (1971) will be used as the foundation for describing the developmental curriculum for the young Black exceptional child. However, they have been modified with specific information to help planners specifically assist the young Black exceptional child. Moreover, this chapter covers a wide variety of handicapping conditions -- low intelligence; motor disabilities; neurological impairments; visual impairments; hearing impairments; learning disabilities; language disabilities; and emotional and behavioral disabilities. The child for whom this curriculum and instruction is designed will have been diagnosed and placed in the preschool center or classroom as his or her least restrictive environment. So, reference to curriculum areas will include experiences in social skills, motor development, arithmetic, science, language arts, creative areas (music, art, dramatic play, movement, block building, and field trips).

The major guidelines for using the material in this section of the chapter to improve your curriculum and instructional program include:

1) Adopt and use a rich curriculum having units in each subject area and designed for preschool children. There is a wealth of curricula (models, books, materials, etc.) available for programs to use.

2) Obtain and use knowledge, skills and attitudes about young children

with handicaps in a diagnostic-prescriptive-intervention approach to teaching and learning. This can be facilitated through inservice training, utilization of support staff like speech therapist, physical therapist, special educators, and by involving parents and other related professional and community resources.

3) Use caregivers who are capable, willing, able and qualified to teach and help the young Black exceptional child through curriculum and instructional strategies from a Black perspective. There must be an acceptance of this child, as a child first, regardless of what he or she can and cannot do.

As this chapter moves into the "goals of early childhood education and the developmental curriculum," remember that its intent is to facilitate (rather than supplant) the design and modification of curriculum and instructional strategies for young, Black exceptional children through the foundation of goals for early childhood education.

Goal One: "To help the child grow in independence." The tasks for implementing this goal in preschool include providing the child the opportunities: to perform the task of dressing him or herself; to increase his or her ability to make wise choices and decisions in a consistent manner; to develop the ability to organize, plan and follow through on simple assignments; to manage "self" as an individual and capable person; to establish routines and patterns of living that bring happiness; and to expect and cope with failures, as well as successes.

Curriculum and instructional strategies should permit children: to receive well-defined directions for performing tasks; to learn routines for functioning in the environment (hanging coats, washing hands, travel patterns for movement in classroom and home); to improve in learning on a developmental continuum based on ability to achieve; to execute self-help skills independently (going to toilet, washing hands, etc.); to experiment with a wide array of curricula activities (art experiences, fixing puzzles, handling toys, playing in housekeeping area, riding the trike, etc.); to use materials, supplies, and

equipment skillfully (design should be scaled to the child's developmental level, size, and interest).

Customarily, Black children perform many acts for "self" because parents are involved with other children and many other aspects of living. They are challenged to perform. "Put on your clothes while I fix breakfast" or "comb your sister's hair" are not uncommon instructions in the Black child's home. Teachers and others must learn to appreciate this mode of living and provide assistance to the child in situations such as: rebuttoning a shirt (criticism and scolding for misbuttoning are inappropriate). The way the preschool program develops this independence rests with the caregivers' attitudes and strategies for aiding the child with special needs. If the caregiver and others act as if offering help is an imposition, the child is probably not being understood, appreciated, and cared for properly. This goal must be revised continuously to make "independence" a reality for the young Black exceptional child.

Goal Two: "To help the child give and share as well as receive affection." This goal presents problems to all children at times, but it is even more pronounced for a Black handicapped child who looks and/or acts differently from his or her classmates or family members. It is hard for children to learn to feel secure and loved. However, the skilled, understanding caregiver can help children learn the necessity of sharing and cooperating with others and managing their feelings. The spiritual values imposed by the family and others also tend to aid children in obtaining this goal.

Since preschool programs are charged with the responsibility of making this goal a reality, the first step is to plan a daily activity schedule which is followed in a classroom atmosphere of warmth and acceptance where children feel good, needed, and wanted. This includes having well-devised learning centers with materials and interests relevant to the Black cultural heritage. All materials,

supplies and equipment should be plentiful and in good condition. The work of each child should bear his or her name, and conversation should occur with the child in which his or her work is described in a positive manner. Another way of fostering this goal is by putting each child in the driver's seat with giant ride 'em toys; by providing experiences in dramatic play and sociodramatic play to act out real life scenes; by making provisions for children to console one another in unpleasant moments as well as in moments of joy and happiness; by stimulating conversation about how children felt in various situations--e.g., when the dog was stolen, or when someone laughed at his or her work, or when it was cold and there was inadequate clothing or fuel sources, or when Mama didn't take him or her shopping, or when he or she didn't get his or her way with the teacher.

There is a lot of love and affection in the homes of Black children. The methods of showing it sometimes vary from traditional society; but careful listening and observation of (parent-child and child-child) interactions in both work and play situations will reveal this love and affection. Nevertheless, sharing may not be freely exhibited by the Black child. The caregiver must understand the scarcity of commodities in his or her home and the need for security in order to deal effectively with this aspect of goal implementation. Having an abundance of nonsexist, nonracist, and sensorial materials is central to combating this dilemma for the Black child who finds it hard to give, share and receive affection.

Goal Three: "To help the child to get along with others." Developing interaction techniques that bring positive responses from within and outside the family unit is a developmental task for preschool programs. The young child must be exposed to experiences that teach attitudes and abilities for functioning in a social group. Children from diverse groups with certain

exceptionalities might need more than normal adult encouragement to fit into and/or to feel part of a social setting. If the caregiver responds to the child's special needs, rather than expecting him or her to work and play with others cooperatively, the other children will treat the child differently and cause conflicts in the social interaction process. Therefore, caregivers must make sure that their attitudes are adjusted to show no prejudices toward the young Black exceptional child which will mark him or her as being different.

Activities which involve group-living experiences -- sharing materials, talking to each other, taking turns, obeying rules, accepting limits, responding to directions, etc.; and using dramatic play, water play, sand play, outdoor play, art, music, show-and-tell for language development, social studies, science, and mathematics--can be beneficial in operationalizing this goal.

The young Black child has a tendency to identify him or herself, peers, and sometimes adults by "nicknames." Get children into the habit of identifying themselves and others by their real name -- not "Peaches," but Mary. The essence of "mainstreaming" different races of children into one educational setting may result in the "nicknames" being seen as "name calling" which oftentimes causes children not to get along with each other. The caregivers must provide avenues for children to grow accustomed to using their proper names. This is possible in everyday greetings; performing singing games and poems or riddles where proper names are used; and having children record conversations and stories on tape from which children identify each other by putting a proper name with a voice. Getting along with others can also be fostered by using pictures of Black people, Blacks with handicaps in various occupational roles and various pictures of ethnic groups in social settings to start conversations and build respect and appreciation for differences in people as they interact.

Consistent use of rules and procedures for interacting help children see the value of getting along. They must be taught to work together to get the job done -- painting a mural, building a block structure, pulling a wagon, cleaning up the learning center, taking turns to perform chores, and so forth. The caregiver is the key for making this concept a reality in the classroom or center. Also, by using parents and community resources in daily operations, the caregiver can help the young Black exceptional child see the team concept in operation, which should underscore the need to get involved and work together to be successful.

Goal Four: "To help the child gain self-control." Self-discipline, self-guidedness and self-direction are essential elements in managing the behavior of all children, but because of the somewhat "active" behavior of the young Black exceptional child, they are even more important. It is important to find the cause of behavior before enforcing consequences ("corporal punishment," "negative reinforcement by parents") or labeling ("hyperactive," "bad," "defiant,") as is often done with the Black child. This child needs ways for understanding and responding appropriately to issues in order to protect him- or herself or "keep out of trouble." This means that the child must be given proper alternatives for expressing his or her emotions that are acceptable in terms of group norms. Care must be taken to see that the child learns to respect authority through rational means rather than through fear!

The caregiver fosters this goal through curricular provisions and instructional strategies that include: many activities that require no right or wrong responses; many self-initiated activities; many instances of frequent praise; many chances for repetition of positive experiences; many ways of moving from one activity to another; and many anxiety-releasing types of activities (throwing

bean bags, kicking balls, punching bags, painting pictures, pounding clay, hammering pegs or nails in boards, singing, running, tumbling, etc.). These aid the child in dealing with his or her inner feelings through what Piaget and others call displacement, positive acting out, and constructive behavioral responses. Self-expression of ideas and actions through dramatic and sociodramatic play are other means for building skills in self-control. The child can become very personally involved in his or her cultural and ethnic heritage through role playing, movement, improvisation, pantomime, puppets, dolls and object manipulation. These help the child remember, think, follow directions, make decisions, reach consensus, and solve/resolve problems. All of these are necessary for helping children, especially Black children, develop self-control.

This goal demands that the preschool program work cooperatively with the home. Caregivers (including teachers, parents, and others) must work out plans for activities and consequences regularly; these should be based on the various behaviors exhibited by children. This strategy will strengthen the child's mastery of self-control.

Goal Five: "To help the child develop a positive self-image." The way a child views him- or herself influences the way he or she behaves which does not always paint an accurate picture of the child. Self-image is learned from the way we are treated by parents, teachers and others in our environment. Personality types vary from one culture to another and from individual to individual. Research indicates the positive and negative effects of various child-rearing practices: tasks children are expected to perform or not perform, and the praise, punishment, or rewards for different competencies or lack thereof. Family members, as well as various outside sources, play a vital role in the development of the child's sense of self-worth. There must be a thorough understanding of cultural

strengths in order to correct the effects of condescending attitudes and negative procedures in the teaching-learning processes Black and handicapped children often go through. Sound educational practices have always stressed the importance of culture as a basic factor in curriculum and instruction (as suggested in the theoretical formulations of Erik Erikson). Yet culture has not always been considered in education for Blacks and the handicapped. Movements to motivate Black children, by stressing their cultural strengths and backgrounds, gave birth to the "Black is Beautiful" and "Black Power" concepts. While seen by many to be an adverse approach, the positive aspects of this "self-identity" theme were very beneficial (Miller, 1974). Hopefully, P.L. 94-142 (1975) will have a similar impact on education for the handicapped.

As the child strives to preserve the integrity of the "self," coupled with desires for enhancing self-esteem, he or she also struggles to become a well-adjusted, motivated, adequate, competent, culturally-proud and social individual. This child must be given opportunities to adapt, adjust and control his or her environment and expanding world in terms of his or her own culture rather than in ways defined by the dominant culture. Caregivers must be constantly reminded of the Black's struggle for self-identity and recognition in the midst of racism and adversity throughout American history even into our present society. Miller (1974) extrapolates different messages, ways of life, and love -- a mechanism of strength for Black children -- from the works and strifes of Countee Cullen, Paul Lawrence Dunbar, James Baldwin, Nat Turner, E.B. Dubois, H. Rap Brown, Gwendolyn Brooks, Dr. Martin Luther King, Jr., Malcolm X, Roy Wilkins and Marcus Garvey. Variations in Black culture and life are continuously being exposed through the works of thousands of Black contemporaries. Caregivers must consider the strengths of the children's culture and life style in building positive self-images. Emphasis on pride and dignity in Blackness, the influence of

African heritage, and the strong focus of aesthetics in life (Black folklore; music in the form of spirituals, blues, jazz, poetry, dance; and art) can be positive parts of curriculum and instruction in the preschool.

As curriculum and instructional strategies are considered and implemented for the young Black exceptional child, caregivers must make provisions to screen, assess, and diagnose children. In this way, educators can provide activities in which children can perform well within their capabilities. Caregivers must make sure that critical comments are stated positively: the act and not the child is criticized. For example, say "If the doll were a real baby, how would it feel if someone hit it in the head?" rather than "You mistreated those dolls as a mean person would do." Then show the child the way to handle toys and objects. A caregiver should be a good model. There should be many activities available for fostering a positive self-image: mirror play and printed materials for observations and conversations; ethnic identifications through books, photos of children and others, pictures in magazines like Ebony, Ebony Jr., charts and posters, etc. Caregivers can also use manipulative materials to aid the child in mastering chores or tasks -- easy-to-fix puzzles, puzzles with knobs for easy handling, nesting cans, stacking cubes, building blocks, and many others. Caregivers can display photos of children in order to help motivate and develop feelings of self-worth. Activities in play that involve group interacting, sharing, talking and thinking also help develop a sense of self. "Show and tell" is a positive method for bringing the child's family into the teaching-learning process. Dramatic and sociodramatic play are also curricula areas important to developing positive self-images. Positive reinforcement must be continuously used to show the young Black exceptional child that his or her contributions and performances are worthy and accepted; positive reinforcement is also used as a symbol of love and approval.

Goal Six: "To help the child to begin understanding his/her body and sex-role identification." Preschool curriculum consists of materials and methods that aid children in identifying body parts and their functions. This step leads to understanding feeding, clothing, caring for, and appreciating the body. Activities are included in the curriculum that are appropriate to the developmental levels of the children. The child must be given opportunities to examine, manipulate, and enjoy materials in accordance with his/her sexual identity. Explorations and various activities germane to sex-role identification will begin as the child grows and develops in a world of social, emotional, physical and intellectual experiences. Caregivers must not allow their prejudices and values to affect the child's selection processes. More and more, society is becoming unisexual in roles and responsibilities and it can be considered a wholesome change. Various occupations are not just for any particular sex, family roles are more cooperative, and sports and aesthetics are more broadly interpreted for both males and females. This nonsexist approach is essential to teaching and learning.

The curriculum must provide opportunities for the child to get experiences for understanding his or her body. Use pictures of the human body for describing and labeling body parts and for discussing functions. Included in the pictures should be genital organs differentiating boys and girls. Motor development and music are areas where this goal can be accomplished easily: i.e. movement, rhythmic exercises, small motor tasks, and running, climbing, jumping, swimming, and singing games. Through language arts, experiences in story telling, show and tell, rhymes, and pantomime, the body can be thoroughly explored. An understanding of the care for the body can be obtained through health and science experiences, like good grooming practices, eating proper foods, getting proper rest, dressing properly and getting medical examinations and checkups.

Care must be taken to mold these activities to meet the needs of the young Black exceptional child. Activities should be repeated such as saying the names of body parts and touching them. Break the tasks into small steps, allow for failure, but provide continuous practice through exercises. A lot of role playing where children can express themselves as others helps to foster sex and role identification. Conversations while washing hands, eating snacks, during breakfast, lunch, or at recess are very beneficial in helping the child to understand the body.

Physical features and structure of the Black child's body can be discussed in view of cultural and ethnic heritage. The caregiver can show pictures of Africans; use stories of slavery to depict the strength portrayed through the Black's strong body structure; and books, and magazines portraying Blacks can be beneficial in appreciating the Black physique, facial structures and the total body feature of Afro-Americans.

Goal Seven: "To help the child develop and learn many large and small motor skills." This goal can be fostered through providing developmental tasks that challenge the child's large and small muscles. Functioning is enhanced by providing and adjusting motor activities to the age, size and development of the child. For the young Black child with a handicap, the caregiver must provide curriculum and instructional activities that will not be in conflict with the handicap. For example, in performing a small motor task like writing, the child with cerebral palsy needs tools (pencil, crayon, brush) that are very fat. The caregiver can wrap the tool with layers of tape or push the pencil through a rubber ball in order to facilitate the performance. If this child is given a regular pencil without the tape or rubber ball, the instructional strategy would be in conflict with the exceptionality. Doing the task by a step-method, praising improvement in performance, drilling in self-help skills,

showing patience and confidence in the child's ability and allowing less than perfect performance are factors that are essential in curriculum and instruction of the young Black exceptional child.

Keeping these factors in mind, curriculum motor skills must include: outdoor play periods that involve vigorous activities to teach large motor skills--like running, dancing, climbing, jumping, pushing and pulling toys, riding large-wheel toys, sliding, swinging and walking. The art activities (painting, modeling clay) provide avenues for large muscle development. Also, block building and dramatic play are areas that provide rich experiences for children with large motor involvement.

For small motor skills, use activities and materials like sewing, writing, drawing, cutting with scissors, snapping and fastening buttons, lacing and tying shoestrings, fastening zippers, playing with small toys, stringing beads and many other experiences requiring the use of the hands and eyes.

Perceptual development is an integral part of motor functioning. Activities and materials that require using the senses for feeling, seeing, touching, smelling, and tasting are characteristic of perceptual skills. Curriculum activities include: using textile boards for feeling different materials such as sandpaper letters, numbers and figures; throwing balls for eye-hand coordination; coloring pictures within the lines; hearing and describing sounds, tasting various flavors of foods; and touching and naming body parts.

The young Black exceptional child as well as other children can benefit greatly from games, free play, outdoor play, dance, movement and many manipulative experiences. The methods and techniques used affect the effectiveness of the motor activity. The child will need guidance in adjusting to the exceptionality and finding ways to compensate for it (Bardwell, Kreig, and Olion, 1973). Much aesthetic appreciation for the arts -- dance, music, sculpture, crafts

and painting -- can be cultivated by focusing on and using cultural heritage.

Goal Eight: "To help the child to begin to understand and control his/her physical world." For the young Black exceptional child, growth and development occur in the face of distorted life styles, underexposure of cultural contributions, racial conflict and adversity, inadequate portrayal of Blacks in the mainstream of society and historical accounts, and inequalities in the educational process. Obstacles thwart the child's understanding of and control over his or her physical world. It, therefore, becomes the developmental task of preschool programs to provide a Black perspective in their curriculum and instructional design.

Fostering this goal means that the curriculum and instructional design will help provide a background of experiences and attitudes that make living and learning meaningful. The child's world puzzle must be pieced together through careful planning, adequate provision and selection of materials, equipment and learning experiences. Instead of using many subjective, attitudinal, value-judgment oriented approaches, caregivers must use scientific information to solve problems, encourage natural curiosity in children, and stimulate creative learning. This helps to develop intelligence -- which includes thinking, reasoning, gathering, and using a variety of information. This is an excellent time for helping children develop good study habits and learn that successes are earned through repeated efforts. Understanding the physical world requires children to become interested, explore, examine, and appreciate their environments. The curriculum must foster this approach.

Fantasy play, dramatic, and sociodramatic play help children to test their worlds. The use of housekeeping areas, unit blocks, large hollow blocks, and block accessories are useful materials for enchancing play. Through science, mathematics, and social studies experiences, the child is exposed to intellec-

tual and scientific planning and discovery. Materials appropriate for this are: telescopes; telephones; microscopes; scales; thermometers; growhouses; mirrors; calendars; pictures of people, places and things; books for reading and conversation; musical instruments; games and puzzles; lotto games; work tools; field trips and neighborhood walks.

The utilization of families and community resources is important with this goal. Involvement of and contributions from parents, community helpers, and neighborhood establishments (churches, schools, businesses) are essential elements in operating sound, effective preschool programs for the young Black child (Dill, 1973). These involvements also make dealing with the exceptionalities easier for teachers.

Goal Nine: "To help the child to learn new language concepts and new vocabulary in his or her social and intellectual activity." Fostering the child's use of speech and language in his or her surroundings and developing meaningful vocabulary to use in communication are developmental tasks for achieving this goal. These activities are encouraged through vocalizations at very early ages by parents and family members; many opportunities for the child to express ideas through show and tell; an introduction to books and printed pages; storytelling, fingerplays, and dramatizations; musical activities; and media -- television, radio, films, filmstrips, etc.

The young Black exceptional child in many cases is born into environments that make the acquisition of adequate communication skills difficult. These psychological and intellectual hinderances cause the child to become handicapped in developing skills in speaking and listening. Many children possess adequate communication and language skills, but, because of emotional problems, cannot use them properly in their social and intellectual activity. Then, there are children who are disabled by psychological, intellectual, and motoric

malfunctions which cause them problems in speech and language development. Many professionals feel that language development and critical thinking are intimately related. Therefore, all children have the same communications needs. However, Smith (1969) noted that disadvantaged children by definition and the nature of their life style have difficulty in becoming linguistically proficient in American society. Many young Black exceptional children fit into Smith's description and are therefore in need of curriculum and instruction to help them attain language skills to cope in this highly verbal society. Success for these children in a preschool program will prevail only when their educational experiences (models for language acquisition; curriculum and materials common to cultural heritage; respect for nonstandard English, but expectations that lead to learning standard English; use of words, terms, reading materials that a child can comprehend, etc.) are designed to meet needs from a Black rather than middle-class white perspective. Immediate measures must be implemented to ameliorate or remediate language deficiencies.

Curricula provisions include using creative arts and crafts as a basis for communication and creative expressions -- e.g., cooking, sewing, crafts, dancing and movement, singing; providing ample avenues for using oral language and listening (show and tell, audiovisuals, puppet shows, storytelling, science experiments, water and sand play, dramatic and sociodramatic play). Stimulating conversation rather than accepting body language and gestures (i.e., pointing, touching) give the child a chance to finish his or her speech. Providing language and word games; puzzles; picture files; word labels; reading and recognizing names, danger signs; using dictionaries; and providing many books, magazines, and sensory materials -- fabrics, scent jars, etc. -- all help in developing language skills.

Instructional strategies include teaching auditory, visual, motoric,

verbal and listening skills through modeling and the use of concrete materials. The caregiver should use many examples and allow practice during instruction; he or she should show respect for nonstandard English insofar as it is a part of the child's cultural environment; he or she should then give opportunities for standard-English tasks; use the "language-through-experience-approach-charts" and real life stories; use all the media available and then be patient and understanding of the child having difficulty.

This goal-oriented approach for designing and modifying curriculum and instruction to facilitate positive appreciation of Black ethnic heritage offers many pluses. The concepts provide information, curriculum materials, and resources that represent experiences and ideas gathered from the author's past and present endeavors in teaching, research, and personal involvement with parents and community resources. As an added feature to strengthening this curricular approach so that it is more responsive to the child with a handicap, intervention strategies are provided below.

A Discussion of Intervention Strategies

Intervention strategies are approaches to teaching. They are structured around the needs of the child, which is essential for the young Black exceptional child. They help the teacher focus attention upon the child's significant handicaps and strengths and they provide a consistent way of dealing with each learning situation. The intervention strategies are based on the child's developmental level and the tasks which he or she should be able to attain; they assure, to a certain extent, that the child will successfully complete these tasks.

These strategies should encourage parent involvement and make provisions for parents to learn how to help the children through reinforcement procedures at home. The strategies work best when they are:

1) Developed as "prescriptions" which are based on the results from the diagnosis and the screening/assessment process.

2) Used in the design and implementation plan for teaching and remediation.

This process eliminates the guessing games and helps teachers, parents and others develop specific tasks for each child based on his or her "individual education program" (IEP).

Intervention strategies for young Black children with special needs should include planned opportunities for experiences and activities for the individual and group needs, likes, abilities, home life and experiential backgrounds of various children in the educational program. In planning and designing these strategies, the following TEN PROVISIONS may be used as a guide to help children:

1) Teach new skills -- which is important to them as individuals as well as vital to the group's functioning.

2) Encourage personal-social opportunities -- which includes sharing, laughing, consoling one another and being helpful to each other.

3) Share experiences with parents -- which involves parents observing and working in the learning process.

4) Encourage working alone -- which means being able to think, browse through materials and be quiet at varying intervals.

5) Help them make plans and decisions -- for special events, for daily activities, about behaviors and routine tasks.

6) Expand their interests -- by visiting places within the school and the neighborhood, and by being exposed to new adventures.

7) Get them "ready -- in the areas of reading, speech, arithemic, writing and find a balance between active and quiet activities (indoor and outdoor play).

8) Develop social values -- which includes developing independence but guarding against aggressiveness, developing pride in ownership which is nonselfish and feeling secure about oneself and responsible in a group.

9) Help them inspect the natural environment -- by exploring, observing, investigating, experimenting and experiencing.

10) Let them grow -- through dramatic play, games, art activities, singing, rhythmic expressions, and personal creativity.

These provisions should be the basis of intervention strategies. Along with the goals for Early Childhood Education, they should be integral parts of the developmental curriculum. These provisions overlap as did the goals; but after all, social, emotional, physical, and intellectual development are interrelated. The provisions are a part of the ingredients needed to organize, manage and operate an effective classroom environment. The second part of this chapter defines the other needed ingredients.

PART 2

EFFECTIVE CHILD AND CLASSROOM MANAGEMENT: FOCUSING ON TEACHING OBJECTIVES RATHER THAN ON DISCIPLINE AND CONTROL

Planning is required for effective child and classroom management. Plans must answer some essential questions: "What are the rules?" "What are the consequences?" "How am I going to punish, if needed?" Child and classroom management involve organizing and structuring the classroom, the day's activities, and the teacher's behavior. The physical environment and sequence of activities must support each other. Classroom organization and methods of instruction determine the degree of effective child and classroom management (Smith and Smith, 1978). The following strategies are offered to improve the learning environment of the young Black exceptional child. Teaching must be based on objectives or too much time will be spent on discipline and control.

Getting Started. Early in the process, write and display a set of rules. These may include: WALK IN ROOM AND IN HALL: RUN IN GYM AND OUTDOORS; BE POLITE; HELP EACH OTHER; PUT AWAY TOYS WHEN FINISHED; WEAR SMOCK WHEN PAINTING; SHARE WITH OTHERS; SAY PLEASE WHEN ASKING; and SAY THANK YOU WHEN SOMEONE GIVES YOU SOMETHING.

Remind the children of the rules by reading them to the children daily. Have children repeat the rules with you. Praise only when specific rules are followed. Make reference to the rules in comments, such as: "I

like the way Johnny is walking the hall." "Mary is really practicing using good manners. She said 'thank you' when Edward gave her the puzzle."

Helpful procedures for effective behavioral management in the classroom include:

1) Specifying, in a positive way, rules that are the basics for the reinforcement. Emphasize the desired behavior by praising the children following the rules. (Rules are made important by providing reinforcement for following them.) Rules may be different for different kinds of work, study, or play periods. Limit the rules to three or less. As the children learn to follow the rules, repeat them less frequently, but continue to praise good behavior.

2) Relating the children's performances to the rules. Praise behavior, not the child. Be specific about behavior that exemplifies paying attention or working hard--"That's right, you are a hard worker." "You watched the pictures when I showed them. That's good paying attention." Relax the rules between work periods. Do not be afraid to have fun with the children when the task is over.

3) Catching the children at being good. Reinforce behavior that will be most beneficial to the child's development. In the process of eliminating disruptive behavior, focus on reinforcing tasks important for social and cognitive skills.

4) Ignoring disruptive behavior unless someone is getting hurt. Focus attention on the children who are working well in order to prompt the correct behavior from the children who are misbehaving or not attending to performing the tasks.

5) Looking for the reinforcer when a persistent problem continues. It just may be your own behavior.

In short, a teacher's (or parent's) stock-in-trade method of handling day-to-day child and classroom management in an effective manner is to: 1) specify rules, 2) ignore disruptive behavior, and 3) praise desired behavior (Becker, et al., 1971). These are basic procedures. Variations must be made, however, for the individual child and the specifics of various situations.

General procedures for planning teaching and instructional operations are necessary for effective child and classroom management. Planning should take into consideration the fact that not all children finish a task in the

same amount of time. For the young Black exceptional child, providing a "cushion activity" between tasks will allow all children, without regard to differences in performance, to complete the task. For example, the children may be told: "When you finish your table games, you may play with the wheel toys."

Plans should be made to provide "systematic prompts or reminders" about what each child should be doing or is to do next. Clear signals about what to do next can help eliminate confusion and wasted time. These items will assist in the prompting process: color-coded name tags, helper hands, lists on the bulletin board and chalk boards, verbal reminders, individual folders, and so forth.

Planning should provide for day-to-day "consistency in routine." The need for daily reminders of varying sorts is greatly reduced by establishing a routine. The completion of one task becomes the cue for the start of the next. For example, "Joe finished his art work. He went to the rest room and washed his hands. Then he went over to the block area and filled the truck with blocks and began to pull it." When the teacher haphazardly moves from one activity to the next on impulse, it becomes very difficult for the children to learn good work habits.

Planning can help in motivating children when one activity is automatically rewarded by the start of another activity. For example, "Sue was browsing through the story books. Upon finishing, she walked over to the easel and began painting a picture of the animals that were in the story and asked the teacher if she could tell the story to the class."

Planning should provide for a periodic "change of pace." Quiet work might be followed by talking or singing. Serious material might be followed by a game. Sitting might be followed by running or a more vigorous activity. Often, just a minute or two of a vigorous activity is all that is needed to ready a

group for more serious work again.

Curriculum and instructional strategies for the young Black exceptional child require that caregivers:

1) Use experiences that don't require RIGHT and WRONG performances and/or set answers. In order to alleviate "child failure," DO:

   - provide few choices (start with one).
   - give directions in simple, clear words.
   - give clues where needed.
   - let the child experience "success" in performing the task (even if you single out just one step done properly or almost properly).
   - plan short-range tasks for immediate success; and long-range tasks for eventual success (developmental).
   - use proper cues to get the child's attention on the task.
   - avoid cues that lead to learning that is irrelevant for the task being presented.

2) Provide experiences that require brief tasks. In early learning stages, DO:

   - present tasks that require only one response.
   - make sure that the response is overlearned through sufficient repetition of experiences.
   - avoid leading the response into a sequence of interrelated concepts.
   - limit the number of concepts presented in any one learning set.
   - show as well as tell.

3) Know the child on a personal basis. Make sure that the material starts from an early level and graduates to a more challenging one, DO:

   - plan from the tasks the child can already do.
   - follow his or her lead for discovering interests.
   - extend the activities in degrees of difficulty.
   - observe child's responses to detect early frustration (when detected go back one step or level).
   - utilize a systematic, step-by-step technique in providing a simple to a more complex sequence of tasks.

4) Avoid quick, drastic change from one task to another. Learning is best facilitated when you, DO:

- gradually move into activities that change tempos (quiet to active).
- present a task in a sequence of small steps, each one built upon a previously learned one.
- help the child generalize from one situation to another.
- present the same concept in various settings and in various relationships (transference of common element in each).

5) Use immediate and continuous reinforcement. It is important that the child know whether or not his or her response is correct. For him or her to have this knowledge, DO:

- reinforce the child when he responds correctly (social activity and/or token reinforcement).
- provide immediate feedback so that the child knows that he or she has responded correctly.
- let him or her know if responses are incorrect along the way; this is part of the process of finding the correct response.

Child and classroom management which focuses on teaching objectives rather than on discipline and control makes the preschool learning environment come alive and promotes happiness, health and successful growth and development of the children who attend. Proper and consistent care and attention must be given to planning, using rules, ignoring disruptive behavior and praising desired behavior, and focusing on teaching objectives.

SUMMARY

The approach used for helping educators and others deal effectively with curriculum and instructional strategies as presented in this chapter is holistic; it involves planning, programming and evaluating. It is the key to helping children, especially Blacks with special needs, compete and function in society to their fullest potential.

Furthermore, this approach tends to keep Black education realistic; programs for preschoolers must take into consideration that young Black minds may

not be totally prepared for a preschool educational program based solely on Black historical continuity. Moreover, all of their problems will not necessarily be solved in terms of developing a sense of Blackness within those preschool years. As Dill (1973) pointed out, Black educators, parents and others must not "over-program" our young Black minds too early.

As we look at the Black experience and convert it into curriculum, warning has been given that the preschool program cannot be a panacea in and of itself, for all of the ills which confront our children (Dill, 1972). Care and consideration must be given to planning programs that provide curricula that will have an effect far beyond the preschool years. Therefore, the goal-oriented curricular mechanism, offered in this chapter, should be used to foster effective instruction and lead to sound, long-range, positive effects for learning. At the same time, curriculum and instructional strategies must be designed from a Black perspective which ensures cultivation and appreciation of the Black ethnic heritage.

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CHAPTER 3

SERVING PARENTS AND FAMILIES OF YOUNG BLACK CHILDREN WITH SPECIAL NEEDS

by JOYCE BICKERSTAFF

School is a child's first major adventure away from home. The things he* has learned to do and think and feel from his parents will color every mile of this adventure and adventures to come.

To reach the child, consequently, teachers need to form a partnership with the parents--one that involves planning for the child's intellectual, social and emotional development. Parents must also see that continuity is established between the things they value and teach at home and the things being taught at school.

Continuity is especially important for minority and handicapped preschoolers whose home environments may be considerably different from school. This chapter includes basic information on the way parents learn to raise their children. It also includes material on the sociopolitical events that have had an impact on child-rearing styles among minorities. The importance of a parent-professional partnership in meeting the needs of minority children is addressed in a question and answer section. And the chapter concludes with a consideration of the role parents should be encouraged to play in supporting their child's educational goals.

PARENT DEVELOPMENT AND CHILD-REARING

The family is the first social group in which an individual learns roles. It is within the home that the concept of parent is developed through interacting with and observing adults. The way parents ultimately raise their

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* He is used generically.

children depends largely on the way they were brought up. Usually, major changes in the child-rearing practices of a culture take a long time to develop. But sweeping social movements in the past two decades have catalyzed the process in the United States. These social changes have been especially dramatic for Black parents. They have not only affected the parents' roles with their children, but also their roles in society as a whole. The effects have been magnified for some Black parents because of problems with poverty, discrimination, rural and urban blight, unemployment, poor health and housing conditions, limited educational achievement, and low self-esteem due to underemployment.

The way many parents have coped with parenting problems has been to rely on professional advice. Many Black parents, however, have been unwilling or unable to take advantage of the child-rearing advice available from physicians and psychiatrists and in women's magazines. In many cases, they are more secure in using their own experiences or the advice of parents. Moreover, child-rearing in Black families is usually considered an instinctive process. Consequently, professional advice may be considered superfluous.

Minority parents are also acutely aware of racial differences. They may worry that advice from professionals does not take crucial cultural differences into account. And much of the advice in popular literature, in any case, is not specific for the Black parent.

Finally, access to professional advice depends upon income level and educational background. Many Blacks and other parents are unaware of the avenues available for obtaining advice. Others simply cannot pay professionals for the advice they have to offer.

For these reasons, educators can make an important difference in the quality of parenting offered to children. They are in a position to help the parents learn about growth and development and to work as partners with

mom and dad in educating the child.

To work effectively, it is necessary to listen to the parents, to be sensitive to their needs and desires. It is important to consider their points of view, even when they conflict with the educational views of the larger society.

It is also important to let them know that the socialization process is different and sometimes more difficult for children with special needs, and that these needs may be further complicated by the racial or ethnic group to which the child belongs. Parents must be led to understand that any kind of special need limits the kind of social interaction a child can have. Parents have to learn to cope at many levels--not merely with the child's special needs--and the educator can offer enormous help. But first, the educational professional must come to understand the factors that have shaped the parents' lives.

Influences on Parent Behavior

The ways parents choose to raise their children depend on an extraordinary number of variables. For example: How were they raised by their parents? What was happening in the country when they were growing up? What region of the nation is their home? What is their educational background? What is their economic situation? The list could stretch to the end of this chapter and still be significantly incomplete. The important point for educators to remember when working with parents is that there is much more than meets the eye to the way parents respond to their children. In this section, some of the critical factors that are often major influences on Black parents will be discussed.

Parent Stress. Many parents try to save their children from the unhappy experiences they themselves had when they were small. Other parents try to base their behavior on what they feel is expected by their peers. Still others feel they should behave in particular ways toward their children, but are

unable to do so because of certain personality characteristics. Any one or all of these approaches to parenting can lead to stress. If it is extreme, stress can rip apart the family or lead to parental behavior which interferes dramatically with the emotional and intellectual development of children.

In some Black families, unusually high levels of stress are caused by economic conditions. For example, many Black women have to work to supplement their family's income. They often have the lowest paying jobs and work for long hours. This may cut deeply into their self-esteem. The mother may not feel she has any control over her environment. She may find it difficult to maintain aspirations for better jobs because her income level and place in the community conspire against any possibility of betterment. This situation sometimes leads to alcohol and drug abuse, child abuse, depression and other serious mental health problems.

Teen pregnancies have also increased the level of stress in some Black families. In fact, statistics, in some instances, indicate that in the past few years the nature of the Black family has changed to include a teen family within the original adult unit (Myers and King, in press). In the 1960s and 70s, the birth rate for teenagers increased while the general birth rate declined. Many of these births were to Blacks (Myers and King, in press). Teenagers are the parents least able in social, physical and economic terms to raise children. In fact, their offspring have a greater than normal chance of being born with handicaps or being born prematurely. Health and developmental progress are often poor for their children, and the situation is further complicated by difficult political, economic and social circumstances.

The problem of stress in parenting has perhaps increased in the last twenty years because of changes in the traditional Black family. While it used to include grandparents and often aunts and uncles under one roof or at least nearby, the family now is, in many instances, only mother and father. This

means that when both parents have to work, less desirable alternatives (than grandparents) for caring for the preschoolers must be used.

One of the ways educators can combat these stresses is to guide parents in child development. Many years ago, Vassar held summer institutes in euthenics--i.e., "the study of the improvement of human functioning and well-being by adjustment of the environment" (American Heritage Dictionary). These institutes ran under the direction of the Vassar College Wimpfheimer Nursery School for two weeks. Entire families were involved in the study of ways to improve the quality of their lives. Parents took courses in child development, furniture placement, and other areas concerning life at home. Children were placed in dormitories apart from parents and were treated to a full-scale program. Many of today's parents and children could profit from this sort of training. It probably would be a welcome change from short-term workshops.

History. The events of history in this society have also influenced the way some Black parents perform their roles. During slavery, fathers were deliberately taken from their families. It has taken many years to undo some of the consequences engendered by that practice. Even though Black fathers are today a vital part of their family units, they are beset with economic problems. They have been denied education, job opportunities and, consequently, opportunities for leadership and advancement. Unfortunately, this same set of problems belonged to their parents and affected, in turn, their own upbringing.

Religion and Values. Historically, religion has played a significant role in the socialization of the Black family. The degree parents are involved in religion influences behavior both toward the children and toward the spouse. Deviation from religious codes on the part of parents or children usually results in stress.

The effect of the combination of religious and cultural values can be

seen in things such as the degree to which a child is permitted to express anger or show physical aggression; the permissiveness, nurturance, or disciplinary approaches characteristic in the family; the general routines and structure of the family's life; the way parents show approval; and their attitudes in general toward the family. All of these factors shape both parent and child. And the child's level of confidence, inhibition, fear and hostility are shaped by the parent.

Statistics. Other influences on parent behavior that educational professionals should consider are:

--The time in the parents' lives that the children were born

--The number of children at home

--Economic status

--Physical and intellectual well-being of the children and parents

--The social and political milieu

--The parents' satisfaction with their children's behavior

--The amount of community resources

THE SOCIOPOLITICAL MILIEU

The 1960s and early 70s represented an unusual period of political and social concern for minorities and for the education of young minority children in low-income areas. With the Economic Opportunities Act of 1964 came a new role for the federal government in the family lives of racial and ethnic groups in poverty neighborhoods. The Civil Rights Act of 1964 was another political and governmental decision that had a great effect on minority parents and children's lives in many ways; both indirectly and directly, and across social strata. The Brown decision of 1954 with its school desegregation edicts began a series of problems within the larger school and social setting resulting in still another realm of direct federal control. These government

acts created a minority population of parents with their own "special needs" even though they directly focused on the children. At least three quarters of the Black population has been touched in some way by these acts.

In some instances, Black communities have been broken up and fragmented by the legislation. In other instances, the communities have been strengthened. Some parents and children have been pleased, some not. This clearly demonstrates, however, the effects of government policy on the future of young minority children. The child with special needs may be alienated from his family and neighborhood, but his parents have little control over the environment. Unlike the non-Black parent who may be discontent with the arrangement and can move away, most minority parents cannot. Nonetheless, the increase in enrollments of Black youngsters in private and parochial educational settings shows that many parents are attempting to exert some control--with tremendous economic sacrifice. Attempts to help parents see that their children can be beneficiaries rather than victims of some of the federal programs that have found as much criticism as acclaim are now being made.

For example, the Head Start Program is making a major effort to intervene in the developmental process of the young child. The focus is comprehensive, with emphasis on social competence, emotional, intellectual and physical growth. Many experimental research and demonstration projects (e.g., HCEEP) include parenting as part of their work. Basic Educational Skills is the latest and perhaps the most intense federal effort to define a new and expanded role for parents--i.e., as educator and learner--by recognizing the parent as the child's first teacher.

All of these efforts are making more and more people aware that parents need help if children are to be helped. There is still a long way to go, but we have nonetheless made much progress.

PARENT-PROFESSIONAL RELATIONSHIPS

The partnership is sometimes difficult to forge, especially with Black parents, for a variety of reasons. For example, teacher and parent values may conflict. The child may come home with behavior learned at school that is unacceptable to the parent. Or the teacher may not be teaching the skills the parent feels are important. Whatever the problems, the first step in the partnership is to help the parent overcome negative feelings toward the school.

What Feelings toward School Do Black Parents Often Have?

Sometimes they are defensive in a school situation because of childhood experiences. They may remember fears of being judged or graded or failing a test. They also may be very sensitive about their image because of the stereotypes and media reports of Black parents as "noncaring, poor, uneducated, emotionally deprived" individuals.

How Can Parents Be Helped through These Feelings?

As a teacher or administrator, be sensitive to the way parents have raised their children. Be willing to guide, but do not judge parental ability.

Also, when you meet parents in a setting outside of education, take the opportunity to broaden your relationship with them. They may then see you as a person more than was possible in the classroom. Use school outings and chance encounters in stores and on sidewalks to do this work.

Try to establish good communication with the parent. In so doing, recognize that he usually has a greater emotional stake in the child than you do. Children are extensions of parent egos. When the child fails, the parents may feel they have failed. When the child succeeds, however, the success belongs to the parents. Because Blacks often fear they will be labeled bad parents when their child fails, it is important for the teacher to reassure them. Point out what they are doing that is right for the child.

As a teacher, clarify your feelings about parents as role models. What is your role as a parent? What role did your parents play in your early schooling? What roles have you observed parents from different ethnic and socioeconomic groups play with their children?

How Do Teachers Alienate Parents?

They imply that a child's poor behavior is the fault of the parent. They pretend that everything is going smoothly when it is not. They may feel uneasy about ways to approach the parent and subsequently remain aloof. They do not treat parents as individuals. They do not make themselves available to parents. They compare children, rather than looking at each child as an individual.

What Are the Problems When the Child Enters an Educational Setting?

Sometimes mothers find it difficult to share the responsibility of their baby with the teacher. The mother, who found the care of her child difficult, may be even more reluctant to share responsibility, because she fears she is shirking her charge or that the child will not receive proper care.

Black children are also usually first generation nursery pupils. This alone leads to misunderstandings between parents and teachers over the school's program and its aims.

How Should Parent Criticism Be Handled?

First, it should be listened to, carefully. Negative feelings can be cleared away only with frank discussions. Instead of acting defensively with parents, because of insecurity about what is going on in the classroom, use criticism as a road to improvement.

In What Other Ways Can Teachers Improve Relationships with Parents?

* Show parents that you are trying to make the best educational decisions for their child.
* Include parents in decision-making: especially during diagnostic and IEP procedures.
* Get acquainted with parents from social and ethnic groups different from your own in order to learn new things.

* Approach parents as adults with whom you can be friends.

PARENTS AND EDUCATIONAL GOALS

In many cases, Black parents feel their own education left something to be desired. Yet they may mistrust new teaching techniques and want to preserve traditional methods of instruction. They may not want to risk allowing innovative methods and materials to be used with their children. They may suspect that these new ideas have little foundation or fear that they represent the trend toward carelessness or overpermissiveness that is currently attributed to educational practices. Or they may feel that those techniques simply lack the rigor that their children need to learn. To many Black parents, self-discipline, rote learning and memorization are familiar approaches which they expect to be used with their children.

For the sake of improving parents' relationships with the school, it is critical that they be made aware of the school's goals for their children. They must understand that teaching methods change with each generation, and that there are now new resources and materials, especially for Black children, and new and better school environments.

It is also necessary, especially with special children, to acquaint parents with the child's learning behavior and the ways you will use to help him function better at home and in society. The parents should also be made aware of ways they can support your effort. For example, they can provide opportunities to learn at home or model certain kinds of behavior.

What Particular Goals Are Important?

Basic goals for children should probably include developing:

1) The capacity for creative, independent thinking.

2) A good self-image.

3) Attitudes of social cooperation and moral responsibility.

4) Knowledge about and appreciation for things, persons and events in the environment.

5) Basic academic skills: i.e., reading, writing and arithmetic.

How Can Parents Be Encouraged to Support Goals?

You should involve them in selecting goals for their child. You can help them learn about child development principles and how they specifically apply to their preschooler. You can encourage them to nurture the child, to act as a model, to be perceptive observers and listeners, and to learn to select appropriate learning experiences. You should also encourage in them the self-confidence and assertiveness they need to advocate effectively for their child.

Parents of special children can also gain the support they need to be effective from other parents. In many ways, the isolation and unwelcomeness they may feel for themselves and their child in certain places (stores, etc.) can be ameliorated by association with parents of "normal" children. When they learn that these parents also have problems with the kids, they lose some of the feeling of aloneness.

What Other Information Is Useful to Parents?

They need to know that their intuitive understanding of the child is a strong educational asset. They need to know what to expect at certain ages (developmental stages). And they need knowledge about the way attitudes are developed (such as racism) and the way to deal with racial conflict. With more knowledge, parents' expectations for their child become more reasonable, and they are better able to treasure their child's individuality.

How Can This Knowledge Be Provided?

There are many ways. The important principle to remember is--parents, like all human beings, need activities in order to learn. In parent-training sessions, practice making materials. Then explain how they can be used with the children.

Then let parents practice using the materials to teach their child a particular concept. Knowledge can also be provided:

1) By allowing the parents to observe the classroom and then discussing what they saw.

2) By allowing them to participate in the classroom.

3) By using conferences, telephone discussions, mailed flyers, etc.

What Should Be the Teacher's Goals in Working with Parents?

A competent teacher learns a great deal from parents. He or she can be helped in understanding a particular child (or parents and children in general) by including parents whenever possible in the educational setting. In fact, it is to the advantage of all educational personnel to be available as much as possible to parents. Giving parents a standing invitation to visit indicates the teacher's openness for observation of the work and an honest desire for interaction with the parents. It also makes it easier for fathers and working mothers, whose schedules make it difficult to set up appointments, to visit the school.

The teacher's goals for improving relationships with parents should also include:

1) Understanding adult developmental stages.

2) Helping parents grow in confidence.

3) Helping parents feel secure, safe, and open with the teacher.

4) Gaining knowledge from parents to improve the child's development.

5) Empathizing with and respecting parents' goals.

6) Establishing a professional relationship with parents by--

--keeping a healthy, energetic attitude.

--guarding against becoming entangled in personal relationships.

--setting and enforcing limits for children and communicating your expectation to both children and adults.

--alerting parents to health and safety problems.

--encouraging parents to help make decisions for their children about educational programs and environments.

--being available to parents.

How Can Goals for Working with Parents Be Implemented?

Home visits help. Home teaching programs are ideal aids to goal implementation when the need is great. Also, child-study groups, groups for parents without partners, and parent-effectiveness training are useful. Lending toys and books along with advice on how to use them can help parents with goals. Family picnics, meetings organized by parents, and especially churches--which are still the centers of many Black communities--are all places where educators can support parents' efforts.

CONCLUSION

The issues we have considered in this chapter do not pertain to all Black parents. Many minority mothers and fathers are using traditional and contemporary parenting methods--alone or in combination--to raise their children. And they are doing it effectively. But given the historical facts which have raised overwhelming economic and social problems for many Black adults in our society, it is not remarkable that there are sets of parenting problems more pronounced for Blacks than for other groups. These problems can be overcome. And education can make an important difference.

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CHAPTER 4
PERSONNEL DEVELOPMENT

by JANE C. BIRCKHEAD AND BETRAM A. COPPOCK, JR.

PART 1: CURRENT ISSUES IN SPECIAL EDUCATION TRAINING IN TRADITIONALLY BLACK COLLEGES AND UNIVERSITIES
by Betram A. Coppock, Jr.

Introduction

Presently there are major factors at work in this country which promise better services for Black handicapped children. But for these activities to prove effective, the nature of training for those who educate these children will have to change. It will have to be improved in quality, content, and range.

This chapter is concerned with the way educators and administrators involved with handicapped preschoolers can be provided with the kind of training they will need to work with Black children effectively. First, the factors which are encouraging and impeding training efforts are examined. Second, the role of the Black college in preparing educators and administrators is scrutinized. And third, the crucial issues for effective personnel training are outlined and discussed.

Factors Affecting Training

Two major factors have a significant part in present attempts to form, develop, and/or expand special education training programs at traditionally Black institutions of higher education. The first factor is Public Law 94-142, the Education for All Handicapped Children Act of 1975. The second is the practice of racism by institutions and individuals.

P.L. 94-142. Fuchigami (1980) wrote in regard to P.L. 94-142:

> ...most analysts acknowledge that much of the impetus for the legislation and its specific requirements was derived from actions and activities of special educators and parents concerned about minority related issues such as inappropriate testing procedures, labeling, disproportionate numbers of culturally diverse children in special classes, inappropriate curricula, and inadequate preparation of teachers and administrators to work with culturally diverse students and parents (p.634).

Certainly the law has fostered a newfound interest in training for people who work with Black and other exceptional children. It has even created ways to provide that training by offering monies for expanding the information that is included in teacher preparation programs on exceptional children (Dean's Grants). But it has also created new issues which go beyond the powers of existing legislation to resolve. For example, handicapped children are to be placed in the "least restrictive" educational setting that is possible. Grosenick and Reynolds (1978) note: "...(this) has social, economic, and political implications in addition to educational ramifications" (p.7). This is especially true when the handicapped child is Black because the child represents not one but two groups who have historically been excluded from the mainstream of middle class education. Training programs for professionals who will work with special children will obviously have to enlarge the abilities of the teachers in training to work with a startling range of human variation.

Racism. The foundations which supported the guarantees and rights to education for exceptional children have their antecedents in the Brown vs. Board of Education Supreme Court ruling of 1954 (Abeson, 1976). This decision dismantled the legal foundation for separate but equal educational practices and facilities. As a result, Afro-American children were legally provided access to education in a multiracial educational environment. They could no longer be isolated, segregated, and denied educational opportunity within the "system" which in the past had hindered their

parent's success solely on the basis of race. The overturning of these laws signaled to many optimists the dawning of an era which would see the rapid assimilation of Blacks into the mainstream of American life.

However, the theories which labeled Black children as racially inferior gave way to more subtle forms of institutional racism with labels such as: culturally deprived, culturally disadvantaged, culturally different, etc. (Baratz and Baratz, 1970). The nature-nurture issue which had been debated in the first half of the century--with some believing all ability depended on genetic heritage (nature) and others believing that educational ability depended on environmental factors (and could be improved through nurturing)--shifted. With the new mood, environment was to be blamed for IQ differences. The differences between Blacks and whites were considered "deficits," with white people being used as a norm. Additionally, Afro-Americans were viewed as a homogeneous group with no diversity. Most Blacks were stereotyped as being members of the poor (Myers, Rana and Harris, 1979).

With testing being what it is, the whole issue of culture became bound up with handicapped: Children who were different from the white norm scored poorly on tests and were assumed to be learning disabled or retarded. Moreover, teachers were, and are still as a group, not adequately prepared to evaluate children without using biased tests.

Black Colleges in America

The traditionally Black institution (TBI) has played an important role, according to Blackwell (1975), in preparing Black people to struggle against racism:

1) By providing an opportunity for advanced training throughout the periods of de jure and de facto segregation.

2) By offering Blacks an opportunity for achievement.

3) By training 80 percent of all Black college graduates.

4) By developing significant leadership forces in the Black community.

5) By serving as a reminder of the "intellectual acumen" among Black people. (p.125)

The Role of the Black Educator. The role of the Black educator is as varied as that of his colleagues elsewhere. Black educators in general, and Black special educators in particular, serve as program administrators, classroom teachers, researchers, community leaders, sources of community expertise and policy interpreters, and--to a small extent--as policy initiators.

However, the bulk of the time spent by Black special educators is in classroom teaching, supervision of student practicums, and student advisement. It is not uncommon for junior and senior faculty alike to share teaching and supervision responsibilities. In small special education departments, it is not uncommon for one or two faculty members to allocate 85 to 90 percent of their time towards activities directed or closely related to teaching, with only about 10 to 15 percent of their time devoted to professional leadership, research or publications.

Additional factors affecting the roles of Black special educators have been:

1) Financial constraints of the university which do not permit adequate support. This has limited educators' opportunities to acquire additional training to stay abreast of the new developments within their fields, which has adversely affected their students and their programs.

2) Desegregation of white institutions of higher education which has created a claim on a greater number of exceptionally talented Black youth as well as junior and senior Black faculty.

3) The tendency to blame the teachers for students' lower performance, as well as for lower levels of program support.

4) The failure of outside agencies to provide advanced training for Black special educators while they perform their duties.

Funding TBI Special Education Programs. Fuchigami (1980) estimates "that over 30% of the children returning to the regular classroom for the major part of the school day are non White minority handicapped children" (p.637). With a figure this large, it would seem reasonable to fund training programs for special educators at Black institutions and provide additional nonfiscal supports (in-service training, staff, facilities) at levels capable of producing enough teachers and others to work with special Black and other nonwhite children effectively.* Yet, in a study of funding patterns in the OSE Division of Personnel Preparation (a division of the former Bureau of Education for the Handicapped), it was found that only 2 to 3 percent of the available training funds, on the average from 1976 through 1979, went to Black colleges (Coppock, 1978). Of the thirty-seven TBIs receiving Division of Personnel Preparation funds during this period, twenty-five were publicly supported schools and twelve were private.

Training in TBIs. A dilemma facing those TBIs with special education programs and courses has been the slow response to the need for faculty--for increasing the number of training programs and adding courses (et cetera) to address the needs of the severely handicapped, parents, paraprofessionals, and other areas of need created by the provisions of P.L. 94-142. TBIs currently as a group emphasize the mild and moderate areas of mental retardation and learning disabilities. Work within the areas of the gifted, the severely mentally retarded, the behaviorally and learning disabled, and parent training is often limited.

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*Black colleges serve more than just Black people, but this is not generally known. Their clients vary in terms of racial, geographic, and language background. Their specific target populations usually include rural and urban groups, various ethnic groups, and non English-speaking groups.

In our review (Moton, 1978) of the top twenty-nine TBIs funded for FY 1978 by the Division of Personnel Preparation, we found that the top five priority areas that these programs saw themselves addressing were:

1) General special education
2) Regular education
3) Interdisciplinary training
4) Early childhood
5) Physical education and paraprofessional training.

It is important to note that the top five disability areas from these institutions were in the mild-to-moderate spectrum.

Personnel trained in these programs, according to our survey, would receive as degree outcomes: 1) a baccalaureate or no degree, 2) a master's degree, 3) certification. None would receive doctorate or postdoctorate training. Presently, there are no doctorate-level programs providing training in any area of exceptionality in any TBI.

Also given the current national thrust in the area of preschool service, it is interesting to note that the target population these programs sought to provide services to were ranked by the participants as follows: 1) elementary, 2) secondary, 3) early childhood.

According to our study, persons matriculating through the programs would be prepared to assume upon completion primarily teaching roles. In fact, the top five ranked trainee roles were related to teaching functions, with administrators or supervisors ranked seventh; trainers/leadership, tenth; research/leadership, fourteenth. There was little or no emphasis placed upon training persons in policy or decision-making roles: e.g., research, training, administration, etc.

Personnel Preparation in the 1980s

Personnel preparation in TBIs must squarely face a series of challenges

and issues if the institutions are to survive, grow and continue to provide personnel equipped to address the educational and leadership needs of Black handicapped children and their parents.

Black colleges are in a unique position to conceptualize and develop innovative programs to meet a variety of issues facing Black handicapped persons. Most TBIs have the organizational flexibility to develop new interdisciplinary models of working together. What is needed is fiscal support and a firm conceptual foundation.

The issue of inadequate fiscal, human, and material resources and support for training programs in TBIs will continue to be a major variable for Black special educators throughout the 1980s. This issue can be addressed by seeking continued federal support in new program areas, but more importantly, by engaging in several activities geared to broaden the program's operating base. For example:

1) Strengthen program operations through collaborative working arrangements within the TBI.

2) Increase programming resources by developing a network at the state, regional, and national levels.

3) Increase program capacity to provide data and conduct research on Afro-American handicapped children and their unique needs.

4) Develop and strengthen long-range planning capabilities in the special education area.

The issue of appropriate special education training, though, extends beyond TBIs. Training institutions as a whole (whether they are predominantly white or Black) are affected, especially since those other than TBIs supply the professional market. Perhaps the key issues in preparing enough people to work with handicapped Black children were best summarized by Fuchigami (1980):

1) Change teacher attitudes and expectations.

2) Develop ways for implementing content that is related to racial and ethnic groups.

3) Familiarize teachers with available materials.

4) Provide inservice training for college faculty.

5) Bolster institutional commitment to provide information about cultural diversity in teacher preparation programs. (pp. 635-636)

Because the critical issues lie in the way we train teachers, Fuchigami suggests that colleges may try one or more of the following approaches in setting curriculum:

1) Use a separate module or course on multicultural education.

2) Use a series of courses.

3) Use a general diffusion of information throughout the curriculum.

4) Use experimental courses. (p. 639)

The course might consist of instruction such as: 1) root cultures from which American ethnic groups have developed; 2) the United States experience for various ethnic groups; 3) the changing cultures of ethnic groups; 4) the relationship of these groups with the rest of society; 5) the current situation of ethnic groups; and 6) the future of ethnic groups (p.639).

In Issues of Common Concern (1979), the nature of the information that should be provided through these courses was expanded upon. Persons who work with culturally diverse children should receive "sensitivity training which includes emphasis on cultural differences, minority needs, needs of minority projects and populations" (p.53). Among ways available for facilitating this training would be to make opportunities available for students to do internships in Handicapped Children's Early Education Program (HCEEP) projects and for the Office of Special Education (OSE) to fund projects for training and certifying Afro-American and other racial and ethnic professionals.

Johnson (1976) further specifies a course for improving educational

services for Black handicapped children. He believes that the core issue is curriculum--without an appropriate curriculum, teachers cannot provide an appropriate education. He writes:

> It is our belief that mainstreaming practices for black children ought to grow out of ideology and be based upon a tested theoretical foundation. This is a basic element of all curriculum development, as much for black children as for any other ethnic group for whom there are documented developmental and educational needs. We are not simply concerned with adaptation of the very model which has caused the present problem, whether for black or white handicapped children. In this case--black handicapped children--we require a new ideological base so that theory testing can be carried out from that base (p.169).

Johnson suggests that six key statements should be used to "influence curriculum development (process and content), instructional strategies, and organizational arrangements for the mainstreaming of black children" (p.169):

1) ...A strengthening through teacher preparation and reeducation of the pedagogical foundations for learning is needed.

2) The black child is a special social and behavioral entity...and this makes the black exceptional child one for whom special teaching is all the more necessary.

3) The development and strengthening of achievement motivation is essential to the task of educating the black exceptional child.

4) Where black children are concerned, the introduction of a program of group relations into everyday classroom life is desirable.

5) Special educators need to draw upon and teach knowledge about open systems theory and methods of organizational development.

6) Effective programming for the black handicapped child requires that special educators build an entirely new relationship with black parents (pp.169-174).

These key statements offer a firm footing for strengthening programs and for improving the major personnel preparation programs in TBIs and in other institutions that prepare teachers to work with the Black handicapped child. They also offer a perspective aimed at maximizing the human potentials of staff and children alike.

Conclusion

Perhaps the essence of all of these suggestions for improving the preparation of teachers and others can be stated thusly: All people who work with culturally diverse children must learn to expand their perceptions to include a conscious recognition and acceptance of their humanity.

McLaughlin-Williams (1977) writes:

> Mainstreaming can become a force for valuing of individual differences, a process to foster acceptance of varying physical, psychological, educational, and racial characteristics, and a futuristic model to celebrate variance as a desirable state. Mainstreaming can be likened to a tributary flowing into a river: Some portions are smooth and placid; others are swift and contain rapids, protuberances, and obstacles; and still others are so difficult passage is tenuous and uncertain, perhaps impossible. If the special education tributary is eventually to flow into the educational mainstream, all barriers must be removed (p.107).

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PART 2: PERSONNEL DEVELOPMENT by Jane C. Birckhead

Introduction

Traditional methods and techniques used for instructing handicapped preschoolers in large urban environments no longer appear appropriate for meeting the individual needs of these children. Several factors are responsible.

One is that institutions of higher education have not been able to prepare teachers adequately to instruct children with diverse needs in urban environments. This has been due, in part, to the various pieces of legislation (e.g., the Education for All Handicapped Children Act of 1975) that have changed the face of education for both the handicapped and non-handicapped student over the past decade.

Second, since teachers have little or no control over school organization, class size, supervisory personnel providing assistance, and the physical structure of the school and classroom, the factors that motivate them to be more sensitive to the needs of young Black handicapped youngsters begin to diminish. Oftentimes these children become the target of teacher frustration, via verbal and nonverbal assaults.

Third, although special educators in urban areas are aware of the problems that young Black children experience and appear to be sensitive to their needs, massive referrals from general educators--many of which are inappropriate--for more restrictive placements for these students tends to dampen the spirits and discourage the advocacy instincts of these special

educators.

Other factors that also affect teacher effectiveness include: the teacher's atttitude about the child, the child's attitude about the teacher, the learning environment, the subject matter being taught, and the environmental conditions which may or may not motivate the child to learn. Also, the influence of parents upon the school, the teacher, and the behavior of their own children plays a significant role in the child's ability to adjust readily to the teaching-learning process.

Moreover, the child's attitude toward the school situation during the early years and his/her perceptions of the way it is supposed to be, have a definite impact on his/her whole school career. Depending upon how education is perceived in the home, children may either enter school with high expectations and good feelings about themselves, or they may enter school without the positive feelings about themselves they need to take advantage of the education available. Unfortunately, the latter generally holds true for many young Black handicapped students.

Special competencies and skills are necessary in order to combat the forces that make teaching the young Black exceptional child in an urban setting ineffective. What is needed are experiences which acquaint the educator with the reality of the culture, the reality of oppression, and the reality of teaching individuals.

The focus of this chapter is personnel development: specifically, inservice training for teachers in urban settings. The basis for this training, which we define as those activities which teachers, administrators, support personnel, and other educational staff members engage in to keep abreast of methods and techniques related to their respective fields of expertise, will be discussed first. Then, recommendations for training approaches will be provided with a list of tips for success.

Basis for Inservice Training

Large cities generally have high concentrations of young Black children who have been identified as handicapped primarily because diagnostic and instructional alternatives have not been appropriately selected. The assessment process fails to accurately determine whether a handicapping condition actually exists or the nature and extent of the condition. Many of these children are given restrictive placements, such as self-contained classrooms in comprehensive schools, special schools, and centers.

The level of functioning of these children, their learning characteristics, curriculum needs, cultural differences, and learning problems, are interrelated. The most resourceful teachers will take these elements into consideration. But they must also develop the skills to use methods that move students toward accomplishing specified goals and objectives. For this reason, Public Law 94-142, the Education for All Handicapped Children Act of 1975, mandates personnel development.

The rules and regulations in P.L. 94-142 pertaining to personnel development make state and local education agencies accountable for providing inservice education. They require that annual needs assessments be conducted to determine inservice training needs and that an ongoing inservice program be made available to all personnel engaged in the education of handicapped students (Skrtic, Knowlton, and Clark, 1979).

Recommendations for Inservice Training

According to White (1971), the ideal program for training teachers to work with disadvantaged children (White's term) will have to be a systems approach, a competency-skill based program operationally defining each individual task and skill used on the job. He believes that these teachers must be trained in a way very different from those in general education.

This applies especially to teachers of young Black exceptional children.

Questions that preservice and inservice trainers must resolve before beginning work with these teachers include:

1) What specific teacher-learner behaviors are in question when speaking of teaching children with special needs?

2) Are you preparing (preservice) young men and women to fulfill the defined teacher role? Are they performing as expected after training?

Paraphrasing White on this topic: if there is going to be a serious, scientific effort to develop effective training programs for teachers of young Black exceptional children, analysis of the teacher's role must be monitored over a period of time and in various situations. Major emphasis must be placed on the goals and objectives teachers should be working toward. Goals for teaching young Black exceptional children certainly overlap with those for teaching other children, but there are significantly different immediate, intermediate, and final goals. Theoretically, the terminal educational goals for all American children are the same, although the skills they develop vary to a great degree.

Tips for Successful Training

The needs of teachers in urban environments necessitate that training be delivered in a variety of ways: for example in large groups and small groups and in situations with simulated experiences that relate to the demands of the classroom situation. The following examples represent a simplified task-analysis type of planning in which a program of activities which are designed to accomplish terminal objectives are planned for teachers.

Example 1. The Teacher will be instructionally guided through a series of videotaped demonstrations which show assessment situations between various qualified examiners and young children. Test results

will be discussed and each child's strengths and weaknesses identified. Based on the information generated, the teacher will write an assessment report and an IEP for one student in the videotape series. Close attention will be given to cultural background, experiences, learning styles and other information available at the time.

Example 2. The teacher will be asked to observe a child's social behaviors during a specified period of time over a number of days in the classroom. The teacher will select a recording method that can be easily managed during instruction. Observation data will be analyzed and the behaviors requiring intervention identified. The observation activity should provide the teacher with more specific information about individual children.

Example 3. The teacher will be given baseline information about a hypothetical group of children. Information will include learning styles, present levels of performance, and behavior orientations. Based on this information, the teacher will develop a daily lesson plan that incorporates individualization for various children within the group setting.

Example 4. Given a parent-teacher interview checklist, the teacher will interview a parent of one child in the classroom and determine ways the resulting information can be useful to the parent and in the child's instructional program.

The success of inservice training programs depends upon the opportunities for input from a variety of individuals who represent the various levels of personnel to be trained. The attitudes of participants during the training will often depend on the amount of involvement they have had in the planning process.

Federal regulations (P.L. 94-142) mandate personnel development

training. State legislation determines suggested priority areas. But the Local Education Agency (LEA) has the responsibility to ensure that teachers possess skills and competencies to fulfill their specialized roles. It may be wise on the part of the LEA along with state personnel to consider some of the following suggestions:

1) Identify and maintain a cadre of training personnel (including Black professionals)--e.g., general and special education teachers, administrators, subject-area specialists and special education supervisors. These people should have expertise in the development of multidimensional training packages based upon the assessed needs of the teachers.

2) Organize and provide leadership to a strong and cohesive Parent Advisory Council that has representation of all children receiving services and parents of children at all age and grade levels.

3) Encourage parent participation in all major system-wide training activities for general and special education teachers. The major responsibility for parent's knowledge and awareness rests with schools and teachers. As Harvey (1977) stated, a critical need for the culturally-diverse child is inclusion of his or her parents as an integral part of the child's program.

4) Support individual school administration efforts to provide personnel development training via the provision of consultant services to address individual needs of teachers. Special education administrators should, however, maintain control over the selection and use of a diversity of qualified consultants through the development of a comprehensive list of persons with expertise in programming for young handicapped children with diverse needs.

5) Provide a variety of built-in incentives for teachers involved in personnel development training--e.g., stipends; inservice or graduate credits from local colleges or universities and certification status arranged for engaging in a sequence of credit courses; training packages and hands-on materials; and training during the school day when substitute teachers are provided.

Many State Education Agencies (SEAs) disseminate needs assessment surveys to general and special educators throughout the local education area subdivisions. It should be a priority in urban areas to examine the results of these data and use them as follows:

1) To see if local needs assessment data match SEA assessment results.

2) To determine the critical areas where the needs of general and special educators coalesce.

3) To identify state and federal priorities emphasized in the needs assessment survey.

4) To determine which subgroups within the professional population need the most and the least training.

5) To determine which needs survey captures data in the most efficient manner.

Inservice Training Program. The Assistant Superintendent in the Division for Special Education in Baltimore City Schools views needs assessment data as a critical part of providing effective teacher training programs that address the perceived needs of instructional personnel as well as what must be done to upgrade competencies and skills and meet the intent of the law. A copy of the needs assessment instrument that will be used by the Baltimore City Public Schools appears as Attachment 1 (p.86) at the end of this chapter.

Generally, training models incorporate flow charts, grids and graphs. We believe that planning for inservice training should incorporate the following steps:

1) Develop and disseminate a needs assessment survey.
   a) Survey teachers using questionnaires and interviews, and gather evaluation feedback on previous workshops.
   b) Contact appropriate support personnel for their observations on the most effective way to work with instructional personnel.

2) Use data from systemwide and state surveys.

3) Review training activities presently existing.

4) Analyze the data on needs to determine the overall goals, objectives, content and methods of evaluating the program.

5) Define basic topics, and analyze the tasks involved in accomplishing the objectives to determine the appropriate sequence and selection of activities.

6) Select time and secure an accessible location for your program.

7) Recruit trained personnel to participate in the program.

8) Provide trainer-orientation sessions. Review content materials and the activities to be carried out to determine strategies for ensuring the success of practicum activities.

9) Develop with trainers a pre- and post-assessment survey to be administered to the participants.

10) Explore incentives such as inservice credit, graduate credit and/or stipends.

11) Notify participants and their supervisors of the times, dates, location and requirements for credit.

12) Review all arrangements and double-check for appropriateness and readiness.

13) Conduct sessions, using a variety of activities and practicum experiences, on the instructional needs and multicultural differences of children.

14) Conduct a formative and a summative evaluation of the training activity.

15) Monitor participant's progress to determine the extent that knowledge and skills from training are used in the classroom. Examine growth gains of children as they relate to IEPs, standardized tests, social interaction analyses, and criterion-referenced tests.

Teachers Who Resist Training. There will always be a population of hard-core teachers who will not be affected by any amount of personnel development training. To them, academic achievement among young Black children is a secondary objective, which means that these children in their charge will fall farther and farther below their age (grade) peers. This group of educators will require special individualized assistance in learning to foster positive achievements in young Black exceptional children.

There are no easy answers as to what can be done for these teachers. However, several succinct steps can be taken. The following suggestions offer some feasible solutions to insure that children receive appropriate education, providing the steps are monitored and systematically applied throughout the school year.

1) Initially, all assistance from the appropriate service provider should be used to meet the needs of particular students in the classroom.

2) Support service providers (e.g., speech and language clinicians, physical therapists) should address only one need area at a time. Self-evaluation by teachers should be encouraged and reinforced.

3) Evaluation of teacher effectiveness should be directly related to child progress and achievement, as measured by the individual education program and standardized and criterion-referenced tests which are generally administered to all children in Title I urban settings.

4) Teacher behavior characteristics and behavioral characteristics of children should be matched to allow for individual preferences and needs.

5) Parents should be encouraged to take an active part in school-wide activities as well as special education classroom activities.

6) Teachers considered hard-core should be placed in situations where the other special education staff members have specific skills in working with young Black exceptional children.

Conclusion

In regard to training teachers in urban setting to work more effectively with young Black handicapped children, Bauer (1977) provides the appropriate conclusion for this chapter. He states that special education administrators and teachers must continually evaluate training needs, develop liaison with educational resource agencies and persons, and engage in active program development for staff education. The multidisciplinary character of special education makes it mandatory that multidisciplinary topics be taught and that some of this training occur in direct conjunction with other disciplines. This means "learning to learn together."

Personnel development training is a continuous process. If properly implemented it can meet needs not addressed at the preservice level and still provide more sophisticated training to experienced personnel. The basic intent of training programs should be to satisfy the identified needs of staff as well as those needs identified by administrators, supervisors and support-service providers.

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Attachment 1

NEEDS ASSESSMENT SURVEY

The survey forms, which begin below with the circular, capture data from a variety of sources and levels within the urban educational environment. Using the survey accomplishes several tasks. First, it gives the teacher information on what other personnel perceive to be his or her needs. Second, it gives the teacher an opportunity to have input in determining the concepts and content to be addressed in a comprehensive training program. Third, it provides a basis upon which evaluative data can be captured regarding the effectiveness of the training.

Needs assessment survey instruments must be updated periodically to reflect changing training priorities. They should be continuously examined to determine better ways to collect and analyze data.

BALTIMORE CITY PUBLIC SCHOOLS
BALTIMORE, MARYLAND 21218
Office of
The Superintendent of Public Instruction

Circular No.
Series 1979-80

March , 1980

TO: Regional Superintendents, Principals and Heads of Central Office Units

FROM: Superintendent, Public Instruction
Deputy Superintendent, Public Instruction
Deputy Superintendent, Bureau of Education
Assistant Superintendent, Division for Exceptional Children

Quality personnel development is essential to improved curriculum development and instruction for handicapped children. The process by which training needs are identified should be comprehensive, multifaceted and interactive.

The purpose of the attached needs assessment is to help determine the nature and level of training needed by administrators, teachers and support personnel relative to legislation, child find, identification, screening, evaluation, placement and instructional programming for handicapped children. The items contained in the needs assessment serve as a basis for identifying priority needs of personnel at the school, regional and central levels so that additional staff development alternatives can be planned and implemented.

The survey has been designed to emphasize a continuum of training needs. This allows respondents to examine and evaluate their own levels of understanding, knowledge, and skills in relation to their background of experiences. Please note that space has been reserved for comments at the end of the survey.

We recognize that personnel preparation is a continuous process and should be organized according to needs of the staff. We will appreciate your support in soliciting thoughtful responses to this position of our needs assessment effort. Please ask each staff member assigned to your building or office to complete an individual survey. All surveys should be collected and returned to _____ by _____.

Again, thank you for your assistance in this endeavor.

Attachment to Circular No.
Page 1

Division for Exceptional Children
Needs Assessment Survey
for
General and Special Educators

Directions I: Please specify your title under one of the three headings on the survey instrument.

Adminstrative	Teacher	Support Personnel
Example:	Example:	Example:
Building Principal	General Educator, Grade	Psychologist
Regional Superintendent	Special Educator, Level of Service	Speech & Language Therapist
School Board Member	Teacher Aide	Social Worker
Coordinator	General Educator (Sec.)	Senior Teacher (Gen. Ed.)
Assistant Superintendent	Special Educator (Science, English, Math, etc.)	Senior Teacher (Spec. Ed.)
		Occupational Therapist
		Physical Therapist

Directions II: Read each statement under the various categories that relate to a component of special education. Determine your status on a 1-5 basis in regard to specific staff development training, experiences or needs you may have in each category.

Use the following information in your decision-making regarding your current status.

1 - awareness level

2 - working knowledge in the area

3 - expertise in the area

4 - not applicable to present assignment

5 - specific need for training

Explanations:

1. Awareness level: Respondent has heard about the area only.

2. Working knowledge in the area: Respondent could participate in activities related to the component but could not train others or take part in training activities.

3. Expertise in the area: Respondent could provide leadership, training, and evaluation feedback in this area.

4. Not applicable to present assignment: Respondent could not apply skills acquired from training to current position assignment.

5. Specific need for training: The respondent needs training in the area in order to fulfill minimum expectations.

Division for Exceptional Children
Needs Assessment Survey
for
General and Special Educators

_____Administrative _____Teacher _____Support Personnel

(Specify) _____General Ed. _____Special Ed. (Specify) _____General Ed. _____Special Ed. (Specify) _____General Ed. _____Special Ed.

Categories	Awareness 1	Knowledge 2	Expertise 3	Not Applicable 4	Specific Needs 5
I. LEGISLATION Federal legislation: P.L. 94-142, Section 504 of the Vocational Rehabilitation Act. Specific Learning Disability Regulations.					
Maryland State By-Laws for Special Education.					
Impact of legislation on special education staffing, class sizes and the referral and screening network.					
Basic terminology relative to least restrictive environment, continuum of services, due process, multiple criteria, Individual Education Programs and Child Find.					
Other (specify).					
II. ASSESSMENT Parent-child rights under the federal and state law in regard to Child Find.					
Appropriate assessment instruments.					

Division for Exceptional Children
Needs Assessment Survey
for
General and Special Educators

Categories	Awareness 1	Knowledge 2	Expertise 3	Not Applicable 4	Specific Needs 5
II. ASSESSMENT (Continued) Administration of norm-referenced and criterion-referenced individual assessment instruments.					
Behavioral observation and recording techniques.					
Use of multiple criteria for decision making regarding evaluation and placement.					
Administration scoring and appropriate use of individual test results.					
Other (specify).					
III. ROLES AND RESPONSIBILITIES The referral process.					
Educational assessments and report writing.					
Maintenance of accurate student records.					
Determination of appropriate instructional systems.					

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Categories	Awareness 1	Knowledge 2	Expertise 3	Not Applicable 4	Specific Needs 5
III. ROLES AND RESPONSIBILITIES (Continued) Review and evaluation of student's progress.					
School Screening Committee functions.					
Other (specify).					
IV. INSTRUCTIONAL PLANNING, DEVELOPMENT, IMPLEMENTATION AND EVALUATION Determination of long- and short-range goals and objectives.					
Development of Individual Education Programs (IEPs).					
Use of alternative instructional delivery procedures and techniques.					
Application of task analysis procedures in determining instructional content.					
Adaptation of instructional materials and curricula to meet individual needs.					
Application of child development knowledge in grouping, individualizing, contracting and determining content, length, and duration of activities.					

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Needs Assessment Survey
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Categories	Awareness 1	Knowledge 2	Expertise 3	Not Applicable 4	Specific Needs 5
IV. INSTRUCTIONAL PLANNING, IMPLEMENTATION AND EVALUATION (Continued) Application of principles of learning during instruction.					
Application of behavioral intervention strategies.					
Joint planning of curriculum planning meeting conducted jointly (by general and special educators).					
Other (specify).					
V. PARENT INVOLVEMENT Due process procedures for parents.					
Parent's role in IEP development, review and follow-up.					
Provision of information to parents regarding community resources.					
Parent-teacher interviews.					
Utilization of parents' skills in the observation of behaviors and as volunteers in the classroom.					

Division for Exceptional Children
Needs Assessment Survey
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General and Special Educators

Categories	Awareness 1	Knowledge 2	Expertise 3	Not Applicable 4	Specific Needs 5
V. PARENT INVOLVEMENT (Continued) Utilization of parents in the training of parents.					
Other (specify).					

CHAPTER 5

ISSUES IN ASSESSMENT

by LADELLE OLION

INTRODUCTION

Federal and state laws, agency policies, and recent court decisions have made professionals and concerned citizens who are involved in the special education of young Black children anxious about assessment techniques and placement procedures. Many professionals are perplexed and disturbed that young Black children remain overrepresented in classes for the mentally retarded while underrepresented in classes for the physically handicapped and gifted (Mercer, 1973 b). Some professionals attribute this inequity to discriminatory assessment procedures and suggest that the flaws in such procedures are so widespread that formal assessment should be discontinued altogether (Oakland, 1977). Other publications have sharply critized the use of standardized tests which form the basis for most evaluations of student progress in American education today (Fields & Jacobson, 1980). Evaluation has been called the major disaster area in education. The Council for Basic Education (Weber, 1974) and the National Council of Teachers of English (Venetzky, 1974) have published pamphlets highly critical of present standardized testing procedures. Green (1975) points out that the use of standardized IQ, aptitude and achievement tests have mushroomed, resulting in vast political and economic implications for Blacks and the poor in the United States. Green contends that the scores that young Black school children achieve on standardized tests greatly affect their educational careers, future employment chances and their adult

lives in general. Additionally, Ebel (1975) points out that the reasons tests are criticized and opposed are not difficult to find: the tests themselves are imperfect and sometimes seriously flawed, used unwisely, misinterpreted, over-interpreted and handled as weapons rather than as tools.

Aware that the aforementioned criticisms of tests and existing testing and referral practices are fraught with legal and moral dangers, and seeking to comply with the law, professionals and concerned citizens have responded to assessment issues in diverse ways. Many still believe that there is nothing wrong with the old way of doing things, but feel that they must simply find alternative ways to avoid prosecution and loss of certain funds (Gerry, 1973). For others, the emphasis is on avoiding the misclassification of Black children; they hold that the changes required only concern the referral and assessment of special populations, the nondominant ethnic and racial groups. Finally, some see in these issues an opportunity to reevaluate the total assessment process. It is in this spirit that this chapter is written. The content is organized to describe and examine issues in the following areas: factors that contribute to the ineptness of current instrumentation; the resultant increase of Black children in special programs; moral and legal rights of Black children and their parents; trends in the assessment of Black children; conclusions and the future. Discussion of these issues will, for the most part, be concerned with children who are between the ages of three and five years, although the information has much relevancy beyond this age group. The primary educational settings of concern here are those governed by state and federal laws which are mandated to provide educational services for children below five years of age. The main consideration is intelligence testing, the subject of much controversy today.

FACTORS THAT CONTRIBUTE TO PROBLEMS IN CURRENT INSTRUMENTATION

The fundamental issues in the testing of Black children emanate from the persistent and undeniable fact that a difference exists between the test scores of Blacks and whites. Over the past fifty years, several studies have repeatedly demonstrated that the mean score of Blacks falls one standard deviation below the mean score of whites, especially on tests which purport to measure levels of intellectual functioning (Samuda, 1976).

Tests often reflect the day-to-day experiences to which middle- and upper-income children are exposed. The experiences of many Black children are not reflected in the content of the tests, and consequently, many Black children start test taking with a good chance of flunking (Green, 1975). Moreover, the use of standardized tests of intelligence on Black children is an example of how professionals, in particular psychologists, have allowed practices that are morally and ethically wrong to continue (Dent, 1976).

Some professionals contend that the main reason for the opposition to tests is that educators are reluctant to be judged and held to account for their actions. Ebel (1975) believes that tests can report competence and incompetence. He further asserts that education is blessed with many capable teachers. He contends, however, that the profession also has its share of mediocrity and false messiahs. Ebel concludes in general that tests used in education are valid and finds little basis for the belief that they are biased against minorities.

Although the testing movement enjoyed a wide degree of public acceptance prior to 1955, in recent years controversy and debate have grown concerning standardized tests and especially the interpretations placed on the test scores

of Blacks and minorities. Testing organizations are being subjected to a national wave of skepticism, disenchantment and criticism. Standardized tests have been said to be biased against Blacks and minorities. Some of the criticisms of standardized tests are examined below.

Construction of Tests

A number of assumptions must be made by the writers of any test. For scores to be valid, these assumptions must be true for the test takers. The assumptions (see below) on which standardized tests are constructed represent a definite source of bias against Black children (Dent, 1976):

1. All children regardless of ethnicity have the same set of experiences and these experiences are tapped by the questions on the test.
2. All who take the test have equal facility with the English language -- each child reads, speaks, and understands the language to the same degree.
3. All children will comprehend the word usage and the context of the question in exactly the same way regardless of differential background experiences.
4. All children, regardless of economic conditions and cultural background, have the same value system.

When applying standardized I.Q. tests to Black children, these assumptions prove inaccurate. Additionally, several other construction factors compound the cultural bias of tests: item selection and item content.

Item Selection. During the item-selection process, experts, whose orientation is largely middle and upper income, develop a large pool of items. These items are tried out on representative samples of the population. The largest segment of that sample will naturally represent the largest segment of the total society, the white middle class. Consequently, the items selected for a complete test will be those items that are most influenced by the responses of the white middle class. Black representation in standardization samples has only a small influence on norms when the try-out samples are dominated by

whites.

After the items are compiled into a complete test, group norms are established by administering the test to a larger number of subjects. Thus the norms and acceptable responses to specific items are determined by the largest segment of the sample -- the white middle class (Dent, 1976).

Is it fair to evaluate young Black children on items that are selected by whites whose orientation is largely middle class? Is it just to penalize children whose experiences do not conform to those of the dominant white middle class? Unfortunately for many Black children, if their responses do not conform to white middle-class standards, it is assumed that their abilities are impaired, and it is presumed that they have a deficit in intellectual endowment.

Item Content. Questions reflecting the cultural experiences of Blacks are seldom among the items on standardized tests. Black children are at a severe disadvantage when they are asked to provide answers to questions that describe situations that they have had no opportunity to experience. Therefore, we find Black children reared in the ghetto being asked, "How would you find your way out of a forest?" Children from welfare families are expected to give the middle class response to the question, "Why is it better to pay bills by check than with cash?"

To illustrate the negative impact of cultural difference and the bias of intelligence tests against many Black children, one need only examine test items such as the fight item on the Wechsler Intelligence Scale for Children (WISC). This question asks children what they would do if struck by a smaller child of the same sex. The correct answer is that it is wrong to hit the child back. Yet, in many Black communities it would be suicidal to walk away or not hit back. Furthermore, many Black children are taught to hit back as a means of survival. Yet this answer receives no credit. This response and others like

it do not conform to white middle-class standards. Nonetheless, divergent responses are erroneously interpreted as indicators of impaired intellectual functioning.

Examiner Bias

A number of professionals have suggested that Black children evidence fears, suspicions, and apprehensions when tested by white examiners. They state that the presence of a white examiner brings about feelings of insecurity, self-degradation, and self-consciousness, and that these and other factors adversely affect the test performance of Black children (Oakland and Matusek, 1977).

Barnes (1972) supports the contention that the examiner's race has an impact on the scores of Black children. He concludes that in general, the evidence suggests that white examiners have subtle deleterious effects on the scores of Black children. Barnes bases his conclusion on studies by Forrester and Klaus (1964), and Katz (1964). In the Forrester and Klaus study, the two authors discovered that Black kindergarteners achieved higher scores on an I.Q. test when examined by a Black examiner than when examined by a white examiner. Katz (1964) discovered that when the administrator of an intelligence test was white, or when comparison with white peers was anticipated by Black students, Black subjects performed more poorly and expressed concern and anxiety over their performance.

Hilliard (1975) also feels that examiner bias is of particular importance. He contends that investigators who attempt to study other cultures must come to recognize that only through intimate contact with people of other cultures is the examiner able to understand the complexities of that culture. A further contention of Hilliard's is that many examiners often do not delve deeply enough into the culture they are observing to make informed assessments possible.

Other professionals disagree to an extent. They point out that the

majority of research examining the influence of the examiner's race on the test performance of Black children reveals no general tendency for these children to score higher or lower when tested by a white or Black examiner on individually administered and group tests (Shuey, 1966; Meyers, Sundstrom, & Yoshida, 1974). These educators point out that allaying children's apprehension and motivating them to do their best seems associated more directly with the examiner's ability to be warm, responsive, receptive and firm than with his/her race. Accordingly, they conclude that a policy to pair examiners with children of the same racial-ethnic group seems unwarranted in most cases.

Whether only Black examiners should be used to assess Black children is a question that is still being debated in some circles: however the key to this issue lies in good judgment. There are certainly situations in which the examiner should be paired with a child of the same race; however, this must depend upon the needs of the individual child. In the majority of cases it appears that allaying children's apprehensions and motivating them to do their best is not related to the examiner's race but to the manner in which rapport is established and maintained, how the examiner responds to the children's attitudes and feelings, and the types of behaviors reinforced.

THE INCREASE OF BLACK CHILDREN IN SPECIAL PROGRAMS

The disproportionate number of Black children in special education classes is a fact that cannot be denied. In spite of the tremendous amount of attention given this issue by parents and concerned educators, the situation for many Black youngsters remains largely unchanged (Mercer, 1973 b). The reasons given for the increase of Black children in special education classes and programs vary among professionals; however, many point out that the present situation exists because various widely used formal tests may have been inappropriate for

use with Black children (Bartel, Grill & Bryen, 1973; Grill, 1973; Sattler, 1973; Sullivan 1973; and Meeker and Meeker, 1973).

Perrone (1976) believes that the standardized test is the culprit. He states that standardized tests have been used increasingly to make judgments about children and contends that children judged to be below average are not likely to have received the kinds of educational opportunity available to children judged above average. Moreover, he feels that placement in remedial and special education programs is usually related to test results. Perrone concludes that these children, who are largely Black and Hispanic, are placed in special classes and are viewed as failures. Thus, he adds, these children learn to view themselves as failures and contribute little to society.

The standardized (I.Q.) tests of intelligence are fraught with additional problems for Blacks. Samuda (1976) reveals that these tests are used to stratify students in terms of estimated potential which leads to labeling and the subsequent effect of a lowered self-concept. They are also used to reinforce myths and stereotypes. They lower expectations from teachers, which leads to poor learning conditions and inferior performance on achievement tests. Thus, a vicious circle is formed and the celebrated predictive validity of the I.Q. test is demonstrated.

Some educators do not believe that the standardized test is the culprit. They argue the score of the intelligence test is not the major factor in determining eligibility for placement of Black children in educable mentally retarded (EMR) classes, and thus the test cannot be primarily responsible for the increase of Black children in special education programs and classes (Education for the Handicapped Law Report, 1980). They also argue that the tests are reliable, valid and do not discriminate against Blacks (Ebel, 1975).

Although some professionals do not like to admit it, the intelligence test and its subsequent score have caused problems. In many instances, the I.Q. tests are culturally biased against young Black children and the scores that individuals earn by taking the tests have been the crucial determinants in the placement of Black children into special classes. This fact is substantiated by the ruling and the expert testimony in the Larry P. vs. Riles (1972) case, a case that involved the California State Department of Education and the San Francisco School District as defendants and six Black students as plaintiffs. A quick review of this case should help to clarify my point.

In the Larry P. vs. Riles case, the students had been placed in EMR classes on the basis of intelligence test scores alone. The plaintiffs marshalled expert testimony and research reports to demonstrate that intelligence tests in general are racially and culturally biased against Black children. The court recognized the cultural bias of the I.Q. tests in question and the misplacement and ensuing harm done to Black children after testing with such measures. The court held that the tests have a discriminatory impact upon Black children and that they have not been validated for placement purposes. Furthermore, the court ordered that the diagnosis of mental retardation may not rest solely on I.Q. tests. The implications and consequences of testing remain real, drastic and pervasive in their effects at all levels and at all stages in the lives of Black children.

MORAL AND LEGAL RIGHTS OF BLACK CHILDREN AND THEIR PARENTS

The decades since 1950 have witnessed an increasing public concern for the rights of Blacks: a concern that is reflected in the enactment of federal and state legislation. In connection with mechanisms for improving the educational opportunities of Blacks, testing has been a major area of focus. The

psychological literature during the 1960s and 1970s contains many discussions of the topic. A number of professionals and organizations (Williams, 1972; Green, 1974; Cardenas, 1972; Dent, 1976; NAACP "Report on Minority Testing," 1976; and the Association of Black Psychologists, 1974) have stated that the moral rights of Black children and their parents have been violated. Primarily, these groups are referring to biases and the misuse of the intelligence test with Black children. They point out that: the experiences of many Black children are not reflected in the test content; opportunities for Blacks to gain experiences have been limited by poverty; tests reflect the day-to-day experiences of middle- and upper-income children; tests are designed by white PhDs from middle-income families; tests do not adequately predict the futures of young Black children; many examiners are not sensitive to Black children and are poorly trained in this regard; and intelligence tests are poor indicators of learning capacity. As a result of some of these problems, some people feel that the construction and use of intelligence tests violate the moral and civil rights of Black children and their parents.

Public Law 94-142 and Section 504 of the Rehabilitation Act of 1973 represent two valuable pieces of legislation that discuss the civil rights of young Black children and their parents in regard to assessment. The following section presents some of the main features of the laws as they pertain to the assessment and placement of Black children.

1) These laws guarantee that without parental consent no school district or official can:

   A) Evaluate a child's abilities and educational needs,

   B) Determine which special education services are necessary, or

   C) Place a child in a special program.

The laws encourage participation by parents in all discussions affecting

their child; and require that parents be fully informed of every decision, the alternatives considered, and the reasons for them. Parents have the right to inspect all of their child's education records, including those concerning his or her identification, evaluation, and placement.

2) The laws require that if school officials think a child needs to be evaluated or placed in a different educational program they must first notify the parents explaining:

   A) What actions are proposed--which tests they want to give, which experts will be involved, and what kind of placement is anticipated.

   B) Why an evaluation is necessary--which existing tests, what behavior, or which records support their view.

   C) What options have been considered and why certain options have been rejected.

   D) Any other reason for recommending a change in placement or program.

It should be noted that it is illegal for anyone to remove a child from the regular school program without an evaluation, without the parents being fully informed, and without parental consent or a final decision by a hearing officer or court.

3) The laws also require that the educational team selected to evaluate the child must include people who know the child well (including the parents, people who the parents select, people who know how to evaluate the information resulting from the various tests, people who specialize in the child's particular disability, and people familiar with service and treatment alternatives).

4) The laws require that a variety of tests and other procedures which are racially and culturally nondiscriminatory must be used to obtain a complete picture of the child's educational needs. The child cannot be evaluated on the basis of any single test, incident, or discussion. Data on health, vision, hearing, social skills, emotional status, general intelligence, academic performance, and physical coordination must all be combined to make up the individualized educational program.

5) Assessments must take into account any special conditions such as the child's inability to speak English or his/her particular handicap (Yohalem & Dinsmore, 1978).

It is recommended that Black parents and their advocates contact their State Department of Education or the Office of Special Education and Rehabilitative

Services in Washington, D.C., to learn more about their legal rights as provided under Public Law 94-142, Section 504, and other state and federal laws.

TRENDS IN THE ASSESSMENT OF BLACK CHILDREN

With many psychologists, educators and courts agreeing that traditional tests are discriminatory, we are faced with the question: What do we do about it? Several alternatives to problems in traditional testing have been proposed. Among the more prominent are nondiscriminatory testing, criterion-referenced testing, and psychosocial testing. Each of these alternatives and their implications for Black children merit discussion.

Nondiscriminatory Testing

One evident trend in the development of alternatives to traditional assessment practices for young Black children is an attempt to develop tests with content that is equally fair or unfair for all children. In contrast to traditional intelligence tests, culture-fair tests deemphasize those factors believed to mitigate against the performance of Black children, specifically, speed, item content, and stress on verbal ability (Laosa, 1977). Culture-fair tests are presented primarily as nonverbal tasks not involving strict time limits and requiring neither written nor spoken language on the part of the Black child. Items are selected on the basis of the extent to which they sample knowledge, skills, and experiences which are equally common or uncommon to all groups. Various professionals (De Avila & Havassy, 1974; Mercer, 1973 a; Samuda, 1975) agree that culture-free or culture-fair tests are, at best, very difficult to construct.

In contrast to the approach to develop a culture-fair test is the culture-specific movement, which involves developing intelligence tests specifically designed for Blacks. Williams (1975), because of his feelings that cultural influence cannot be divorced from the testing process, has designed a test

that would capitalize on the type of information to which the average Black person has been exposed. Williams' test, the Black Intelligence Test of Cultural Homogeneity (BITCH), is constructed by Blacks, for Blacks and standardized on Black groups, and deals exclusively with the Black experience. Although the BITCH test is not specifically designed for young Black children, it does represent a significant alternative to traditional testing practices. A test of this nature may hold great promise for use with young Black children in the future.

Criterion-Referenced Testing

Most test theories and practices are based upon norm-referenced testing; however, criterion-referenced testing, another method of interpreting a child's achievement, has emerged recently. Criterion-referenced testing interprets achievement by describing in behavioral terms the child's performance regarding a particular instructional objective. The standard or criterion is usually predetermined and it provides a standard against which to compare the child's achievement. It is important to note that when criterion-referenced tests are used there is no reference to the level of performance of other members of the group (Laosa, 1977); only precise criterion behaviors are used as references. Ability to tie one's shoes, to eat unassisted, to bathe, to count change, and to name common household objects represent behaviors that are generally assessed by criterion-referenced measures. Knowing that a child can perform one or more of the above behaviors is more instructionally informative than knowing he/she ranks in the fifth percentile of a norm group (Oakland and Matuszek, 1977).

Criterion-referenced testing is a potentially useful, viable alternative to traditional testing practices for Black children. Nevertheless, it is not immune to misuse. Reliability, validity and eliminating cultural biases are still potential problems that exist with these tests (Laosa, 1973;

Martinez, 1972; Oakland and Matuszek, 1977; and Bailey and Harbin, 1980).

Psychosocial Testing

Psychosocial measures, such as the Adaptive Behavior Inventory for Children (Mercer and Lewis, 1978), have been developed to assess the child's ability to participate in social roles in the home and community. In general, adaptive behavior scales attempt to measure the ability of an individual to cope with the natural and social demands of the environment (Grossman, 1973).

Many educators are advocating the use of adaptive behavior scales, since their use tends to reduce the placement of Black children in special classes. However, Bailey and Harbin (1980) point out that a number of issues need to be resolved before the utility of these scales can be fully determined. First, there needs to be a consensus among professionals as to what comprises the adaptive behavior construct. Second, work needs to be done to ensure the accuracy of the data collected. Third, since ratings by counselors, teachers and parents disagree greatly, the reliability and validity of these instruments need to be documented.

It appears that many professionals are making a concerted effort to respond to the legal and legislative mandate to reduce bias in testing Black children. However, as Bailey and Harbin (1980) point out, it will be a hollow victory unless the educational programs to which Black children are assigned meet the needs of the children.

CONCLUSIONS

Only a few of the major issues that are confronting us in the assessment of young Black children have been examined here. What conclusions can be drawn from these discussions and more importantly, what about the future?

At this point it is safe to say that the problems as well as the solutions surrounding the assessment of young Black children are complex. Many of the

techniques proposed as replacements for traditional testing are themselves fraught with limitations. We have seen that the way intelligence tests are constructed represents a definite source of bias against Black children. While one frequently hears that tests are valid and not biased against Blacks, the persons supporting the tests are often a part of the white middle class, and the test questions are taken from their white middle-class experiences. One wonders what would happen if the shoe were on the other foot and the items selected for the test were taken primarily from the experiences of Blacks. Would those persons who scored poorly feel that I.Q. tests were valid for them? Perhaps not. Would they consider the tests biased?

In regard to item selection and content, one can only conclude that the impact of cultural differences must be allowed and the bias in the intelligence test eliminated if Black children are going to be validly assessed. Additionally, examiner bias must be eliminated. We must have better training programs for examiners.

The issue of proper training of examiners is a major area of concern in many communities, yet persons in responsible positions are not speaking out about the poor job that some examiners are doing. Unfortunately, some examiners are clearly in testing only for the monetary gain. Some are more interested in the number of children they assess, rather than in the quality of their work. Standards to become a licensed examiner or psychologist must be strengthened in some instances and adhered to in all cases. Examiners who work with Black children must be sensitive to the needs of these children.

On the issue of race and the examiner: when a Black child has an attitude of fear and suspicion and is uncomfortable with a white examiner in the testing situation, a sensitive Black examiner should be paired with the Black child. However, one should note that examiners of other races can also effectively

assess young Black children. When examining this question, it is important to remember that all examiners need to be warm, receptive and have rapport with the young Black child if they are going to be successful in eliciting his/her best effort.

On the issue of legal and moral rights of young Black children and their parents, we find that the law guarantees parents the right to be involved in their child's future. All parents can now question the evaluation of their child. If parents disagree with the evaluation they may follow certain procedures for their child to be reevaluated. It should also be remembered that the law requires that a variety of tests which are racially and culturally nondiscriminatory be used to obtain a complete picture of the child's educational needs.

On trends in assessing Black children: it is generally agreed that culture-free and culture-fair tests are difficult to construct. Yet, the culture-specific movement seems to provide us with some hope that perhaps this approach will be a viable alternative to traditional testing. Nevertheless, much work still needs to be done. Criterion-referenced and psychosocial testing are alternatives to traditional testing. However, they too suffer some limitations. Thus, we find ourselves in a complex situation in regard to assessing young Black children. But what should we do now and in what direction should we go in the future? Perhaps some answers to these questions can be found in the following discussion.

The Future

One of the first steps that we should take is to think in terms of assessing rather than testing young Black children. Testing is done with assessment in mind, however assessment does not necessarily result in a score. The functions of assessment are educational programming, decision making, and

intervention. Testing has its limitations in that scores are earned and decisions are made based on the scores. We must realize that testing is in no way equivalent to assessment. This vital distinction must be made if we are to deal adequately with issues in the assessment of young Black children in the future.

Parent involvement is a vital issue in the assessment of Black children that must be improved in the future. Black parents must not allow their children to be judged on the basis of intelligence tests alone. Parents must insist that such factors as the child's interests and subjects which challenge the child be considered when planning his or her educational program. Most of all, Black parents must be consistently and actively involved in the education of their children. If young Black children are to reach their potential, the parents of these children must become advocates at all levels of the educational hierarchy. Black professionals and concerned educators must extend a helping hand to uninformed and poorly trained Black parents, if they are to become effective advocates. Training in the proper questions to ask, where to go for information, and children and parent rights are but a few of the areas in which Black professionals should provide training and assistance in the future.

Teacher involvement is another important area that we must be concerned with in the future. Assessment is a part of the ongoing teaching process. The teacher works directly with the child and needs observational information and assessment results to plan teaching strategies. The rapport that is often built between teacher and student is an important reason for the teacher to take an active role in the assessment process in the future. The teacher must bring information to the assessment as well as take information from it.

In regard to future directions in assessment of Black children, we must look toward informal rather than formal assessment. Our skills in observing and interviewing young Black children must be sharpened. We must utilize anecdotal information, actual work samples and other less formal techniques to provide useful information on young Black children. Pluralistic assessment and the assessment model based on the work of Jean Piaget are other alternatives that we must examine for future use.

In the final analysis, we need to review our reasons for testing. If our goal is to preserve the status quo, then it follows that the traditional intelligence test which is tied to the experiences of the white middle class will serve our purpose quite well. However, if our purpose is to assess equitably all children in the educational setting, then our purposes, processes and goals for testing must change. In the future we must continually look for new assessment practices and instruments to use in the assessment of young Black children. We must expand our research endeavors and work toward the goal of providing environments in which young Black children can grow and develop to their full potential.

These are some of the directions that we can go in the future. The direction that we take must be determined by Black parents and the professionals who are concerned with the appropriate assessment of the young Black child.

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CHAPTER 6

MENTAL HEALTH PROBLEMS AND THE BLACK CHILD: ISSUES OF INCIDENCE, TREATMENT AND PREVENTION

by HECTOR F. MYERS

INTRODUCTION

There is growing alarm in the mental health field over the disturbing trends in developmental patterns and performance and functioning levels of the Black child in America. This concern is particularly acute for the low-income, urban Black child. Increasingly we read reports of high prematurity rates, problems of malnutrition, and of early childhood risk for a range of disorders (NCHS Report, 1976). We also read reports of increasing rates of academic failure and of school drop-outs; of increasing juvenile gang memberships and the corresponding increases in criminal behavior and in drug and alcohol use (Single et al. 1974; Kleinman & Lukoff, 1978; Fairchild, 1978). Increases in the incidence of adolescent pregnancy and parenting (Menchen, 1975; Baldwin, 1976), the alarming rates of Black youth unemployment, suicide, and the growing despair of Black parents clearly underscore the harsh reality of the crisis in Black mental health and social status (Hendin, 1969; Seiden, 1972; National Urban League, 1978).

In response to the variety of concerns articulated by Black parents and the problems experienced by a growing number of Black children, we see a proliferation of well-intentioned, but poorly conceptualized, organized and funded programs. New educational programs, for example, are being designed and implemented, only to be discarded after limited testing. The same is true of social programs ostensibly designed to address the areas of unemployment, re-

creation, skill training, transportation, etc.

In the mental health field, a similar unorganized proliferation of programs is evident. New programs are created; then they are revised in reaction to changes in the surface manifestations of mental health problems. Consequently, there is little impact on the fundamental causal factors and processes.

The Black child's present state of mental health and functioning, especially in urban and poor communities, is alarming. Clearly, thousands of Black children are increasingly less capable of negotiating the rough waters of American society. This state of underpreparedness, however, cannot be simplistically attributed to deficiencies in the child, the family or the community. A more complex analysis of both the structure and systematic process that has led to the present situation is required if the status of Black children's mental health is to be understood and improved.

In this chapter I will present such an analysis using the most recently published data on mental health care over the past twenty years. First, Blacks and whites and males and females under the age of twenty will be compared; then projections of mental health needs into the mid 1980s will be discussed. Second, causes for changes in mental health services will be explored along with the implications for the future of services to the Black population. Third, two illustrative programs of primary and secondary prevention with Black children and their parents will be addressed in detail. Finally, recommendations will be offered for future programming for Black children in the mental health field.

A note of caution is important at this juncture. The analysis of the state of Black mental health is a complex problem fraught with many pitfalls. On the one hand, the available national statistics describe the pattern of contact and utilization of mental health services by children. But these are only estimates of the true incidence and prevalence of mental and emotional disorders

in children. Use of health care varies according to race and social class, and Blacks and the poor tend to be over represented among those served by public mental health agencies. Therefore, statistics from those agencies may provide somewhat inflated estimates of the occurrence of specific disorders among Blacks and poor children. Also, some evidence suggests that Blacks and the poor seek care only after a problem has reached fairly severe proportions. This pattern of health care utilization, combined with the documented tendency of health care providers to give Black and other poor individuals the more severe of possible diagnoses (e.g., schizophrenia as opposed to mild emotional disorder) results in a disproportionate number of the Black or poor among those diagnosed as most severely disordered, among those most likely to be institutionalized, among those most likely to receive psychotropic medication and custodial care, and among those with the least encouraging prognoses (Hollingshead & Redlich, 1959; Srole et al., 1962; Srole, 1975).

MENTAL HEALTH PROBLEMS: ISSUES OF PREVALENCE AND TREATMENT

In a series of recent statistical reports by the National Institute of Mental Health on admission rates for children and youth under age twenty to psychiatric hospitals and clinics, to institutions for criminal incarceration, and to other institutions, we find distinct race and sex trends. (Note: data for the birth-to-five years age group are not available as a separate data set but are included in statistics for children below the age of fourteen years.)

Looking at the available mental health statistics for 1950, 1960, 1970, 1975 and projecting these trends to 1985, we see a disturbing pattern of increasing casualty rates among urban Blacks. Additionally, we see increasing and disproportionate reliance on hospitalization and incarceration as the major

primary care model for dealing with Black mental health.

Trends in Psychiatric Hospitalization

For children and youth of all races and both sexes, noticeable increases over the past twenty years have occurred in the numbers admitted to psychiatric settings. In terms of raw numbers, whites exceed nonwhites[1] and males exceed females. However, when the rates of admission for each 100,000 people are considered, Black males are disproportionately represented in hospitalized populations and Black females far exceed white females. Between 1950 and 1970, the rates (per 100,000) for Black males ranged from 45.2 to 79.8 persons admitted; and for Black females, from 26.1 to 41.5. For white males the hospitalization rates ranged from 23.5 to 54.3, while for white females the rates range from 15.2 to 31.1. (See Table 1.)

Extending these trends to 1975, and analyzing the age-related trends for each of the four sex and race groups more precisely, we see that hospitalization steadily increases from the 14 through the 18-24 age range. We see further evidence that Black male and female hospitalization rates continue to exceed those of white males and females. Below age 14, the highest rates/100,000 of psychiatric hospitalization are reported by Black females (3.5 percent) and Black males (3.0 percent). Between the ages 14-17, the highest rates/100,000 are again reported by Black males (5.9 percent) and Black females (4.6 percent). Between ages 18-24, Black males have the highest rates (24.4 percent), followed by white males (20.0 percent) and by Black females (14.4 percent). (See Table 2.)

[1] Data by race is reported as whites vs. nonwhites. A substantial proportion of the nonwhite group is Black. Consequently, the nonwhite group provides a very good estimate of patterns of Black mental health casualties. In this text, we have equated "nonwhite" with "Black" for purposes of comparison.

TABLE 1

Number of Persons and Rate/100,000 Population of Persons under Age 25, Hospitalized in Psychiatric Institutions from 1950, 1960, & 1970, by Sex and Race, U.S.

	NUMBER OF PERSONS			RATE/100,000 POPULATION		
	1950	1960	1970	1950	1960	1970
HITE MALES	5,371	10,415	18,090	23.5	34.3	54.3
HITE FEMALES	3,344	5,359	9,976	15.2	18.3	31.1
ONWHITE MALES*	1,459	2,265	4,632	45.2	48.7	79.8
ONWHITE FEMALES	849	1,130	2,402	26.1	24.2	41.5

Abstracted from Morton Kramer, National Institute of Mental Health Series, No. 12, Psychiatric Services and the Changing Institutional Scene, 1950-1985. Department of Health, Education and Welfare Publication No. (ADM) 77-433, 1977, pp. 63-64, p.89.

*Data by race is reported as white versus nonwhite. A substantial proportion of the nonwhite group is Black. Consequently, the nonwhite group provides a very good estimate of the patterns of Black mental health casualties. In this text, we have equated 'nonwhite' with 'Black' for purposes of comparison.

TABLE 2

Admissions to State and County Psychiatric Hospitals of Persons under Age 24, by Sex and Race, in the U.S., 1975: Rate/100,000 Population and Percentage Distribution by Age

AGE	WHITE-MALES	WHITE FEMALES	NONWHITE MALES*	NONWHITE FEMALES
		NUMBER OF ADMISSIONS		
14	4,001	1,662	1,745	1,096
14-17	7,140	4,745	3,432	1,431
18-24	38,108	15,050	14,215	4,468
14	19.0	8.3	[illegible]	27.0
14-17	[illegible]	[illegible]	[illegible]	110.4
18-24	243.9	129.4	[illegible]	222.8
		PERCENT DISTRIBUTION BY AGE		
14	2.1	1.6	3.0	3.5
14-17	3.7	4.5	5.9	4.6
18-24	20.0	14.3	24.4	14.4

Abstracted from Milozzo-Soyse, Admission Rates to State and County Psychiatric Hospitals by Age, Sex and Race, U.S., 1975. Mental Health Statistical Note No. 140. Department of Health, Education and Welfare Publication No. (ADM) 78-158, November, 1977, p.8.

*Data by race is reported as white versus nonwhite. A substantial proportion of the nonwhite group is Black. Consequently, the nonwhite group provides a very good estimate of the patterns of Black mental health casualties. In this text, we have equated 'nonwhite' with 'Black' for purposes of comparison.

If the 1970 rates of psychiatric admissions of children by race are projected to 1985, assuming no significant changes in population trends, whites are projected to show a decrease of 10 percent overall, while nonwhites will show an increase of 7.6 percent overall. (See Table 3.) This trend is also evident when the most severe disorder, schizophrenia, is projected. By 1985, white youth hospitalization for schizophrenic disorders is expected to decrease by 9.4 percent, while nonwhite hospitalization rates for schizophrenia are expected to increase 6.9 percent. (See Table 4.) This means that not only are Black children and youth proportionately more likely to be hospitalized in psychiatric institutions than white children and youth, but over the next five years, the trend towards the hospitalization of emotionally impaired white children will show a substantial decrease, while that for nonwhites will increase.

These differences may reflect either differences in the mental health status of Black and white youth (i.e., the mental health of white youth is improving, while that of Blacks is deteriorating), or an increasing pattern of differential treatment of emotional disorders for Black and white youth. The truth probably includes elements from both of these explanations. Black children today, especially those from low-income backgrounds, are probably at greater mental health risk because of increases in exposure to the associated stresses (Dohrenwend, 1967; Dohrenwend & Dohrenwend, 1967, 1969, 1970; Gersten et al., 1974, 1977; Myers & King, in press; J.K. Myers, et al. 1974).

The increasing hospitalization rate differentials, however, probably reflect the national mood of retrenchment and conservation, socially, economically and in methods of treatment. The Community Mental Health Centers, and the liberal health care concept of the 1960s which were conceptualized as progressive strategies for providing good quality mental health services to Blacks and other underserved groups are now under siege. Most centers are plagued by crises in

TABLE 3

Number of Admissions, Change in the Number of Admissions & Percentage Change in the Number of Admissions, Children under Age 18: 1970-1985 (Projected) by Race: U.S.

	NUMBER OF ADMISSIONS		CHANGE IN NUMBER OF ADMISSIONS	PERCENT CHANGE IN NUMBER OF ADMISSIONS
	1970	1985	1970-1985	1970-1985
WHITES	370,555	[illegible]	- 36,948	- 10.0
NONWHITES*	79,418	[illegible]	+ 6,002	+ 7.6

Abstracted from Morton Kramer, National Institute of Mental Health Series, No. 12 Psychiatric Services and the Changing Institutional Scene, 1950-1985. Department of Health Education and Welfare Publication No. (ADM) 77-433, 1977, pp.63-64, 89.

*Data by race is reported as white versus nonwhite. A substantial proportion of the nonwhite group is Black. Consequently, the nonwhite group provides a very good estimate of the patterns of Black mental health casualties. In this text, we have equated 'nonwhite' with 'Black' for purposes of comparison.

TABLE 4

Number of Cases of Schizophrenia under Age 15 Receiving Care, Change in the Number, and the Percent Change in the Number Receiving Care, 1970-1985 (Projected), by Race, U. S.

	NO. IN CARE 1970	NO. IN CARE 1985 (Projected)	CHANGE IN NO. IN CARE 1970 - 1985 (Projected)	PERCENT CHANGE IN NO. IN CARE 1970 - 1985 (Projected)
WHITE	16,661	15,090	- 1,571	- 9.4
NONWHITE*	4,538	4,850	+ .312	+ 6.9

Abstracted from: Morton Kramer, National Institute of Mental Health Series B. No. 12 Psychiatric Services and the Changing Institutional Scene, 1950-1985. Department of Health Education and Welfare Publication No. (ADM) 77-433, 1977, p. 94.

*Data by race is reported as white versus nonwhite. A substantial proportion of the nonwhite group is Black. Consequently, the nonwhite group provides a very good estimate of the patterns of Black mental health casualties. In this text, we have equated 'nonwhite' with 'Black' for purposes of comparison.

TABLE 5

Number and Rate/100,000 Population of Persons, under Age 20, in Institutions by Type of Institution, Sex & Race: U.S., 1950, 1960 & 1970

	NUMBER OF PERSONS			RATE/100,000 POPULATION		
INSTITUTION, RACE, SEX	1950	1960	1970	1950	1960	1970
CORRECTIONAL INSTITUTIONS						
White Males	12,121	20,026	17,434	53.1	66.0	52.3
White Females	797	1,153	1,340	3.6	3.9	4.2
Nonwhite Males*	5,988	10,710	16,566	115.6	230.5	285.3
Nonwhite Females	569	718	879	17.5	15.4	15.2
HOMES & SCHOOLS FOR THE MENTALLY HANDICAPPED						
White Males	24,887	38,719	41,864	109.0	127.6	125.6
White Females	18,343	27,097	27.741	83.2	92.3	86.6
Nonwhite Males	1,781	4,551	7,740	55.2	97.9	133.3
Nonwhite Females	1,254	3,512	5,083	38.6	76.3	87.8
TRAINING SCHOOLS FOR JUVENILE DELINQUENTS						
White Males	16,855	21,737	27,053	73.8	71.6	81.2
White Females	10,029	8,256	8,330	45.5	28.1	26.0
Nonwhite Males	5,854	10,666	19,312	181.4	229.5	332.6
Nonwhite Females	2,004	3,342	4,641	61.7	71.6	80.1
DETENTION HOMES						
White Males	1,335	4,678	4,008	5.8	15.4	12.0
White Females	554	1,995	2,578	2.5	6.8	8.0
Nonwhite Males*	413	2,322	2,411	12.8	50.0	41.5
Nonwhite Females	145	871	1,063	4.5	18.7	18.4
HOMES FOR UNWED MOTHERS						
White Females	2,101	2,227	2,580	9.5	7.6	8.1
Nonwhite Females	190	408	649	5.8	8.7	11.2
HOMES FOR NEGLECTED & DEPENDENT CHILDREN						
White Males	50,462	35,896	22,742	221.1	118.3	68.2
White Females	39,309	26,515	14,801	178.3	90.3	46.2
Nonwhite Males	2,891	4,679	4,601	89.6	100.7	79.2
Nonwhite Females	2,411	3,635	3,115	74.7	78.2	53.6

Abstract from Morton Kramer, National Institute of Mental Health Series B, No. 12. Psychiatric Services and the Changing Institutional Scene, 1950-1985. Department of Health, Education and Welfare, No. (ADM) 77-433, 1977, pp.65-74.

* Data by race is reported as white versus nonwhite. A substantial proportion of the nonwhite group is Black. Consequently, the nonwhite group provides a very good estimate of the patterns of Black mental health casualties. In this text, we have equated 'nonwhite' with 'Black' for purposes of comparison.

finances, leadership and morale, and most are turning away from aggressive community models of primary prevention and outreach and back to traditional medical models of treatment (Bachrach, 1979). And, as this mental health care alternative becomes increasingly less effective and responsive to the increasing demands of its low-income ethnic constituency, there appears to be a growing tendency to revert to the other more traditional social institutions for dealing with mental health cases (i.e., juvenile detention and incarceration, foster homes, homes for the handicapped, homes for unwed teen mothers, state psychiatric hospitals, etc.).

Trends in Nonpsychiatric Institutionalization

The trends in institutionalization reported for psychiatric institutions are also evident in institutional settings that address issues related to mental health (see Table 5). However, in correctional institutions, the rate of incarcerations per 100,000 for youth under age of twenty by race and sex show a slightly different picture. For white males from 1950-1970, the rates of institutionalization increased from 1950 (53.1) to 1960 (66.0), but show a slight drop by 1970 (52.3). For white females, on the other hand, the trend over the same twenty-year period is increasing (3.6, 3.9 and 4.2 respectively). Note, however, the very small numbers of white females actually incarcerated.

For nonwhites, the trends are clearly different. Nonwhite males show the highest rates of incarceration overall and show marked rate increases from 1950 (115.6) to 1960 (230.5), to 1970 (285.3). Nonwhite females, on the other hand, show rates of over five times that for white females, but their rates of incarceration over the two decades are decreasing (i.e., 17.5, 15.4 and 15.2, respectively).

In the case of training schools for juvenile delinquents and for detention homes, the trends are slightly different. For training schools, the trends

for white males and nonwhite males and females are increasing, with the nonwhite male showing the disproportionally highest rate (181.4, 229.5 and 332.6 between 1950-1970). For white females, however, the trends are decreasing. In the case of detention homes, however, for females both white and nonwhite, the trends are generally increasing; while for males, both white and nonwhite, increases occur through 1960 and then show a slight decrease by 1970.

Institutionalization as the intervention strategy of choice for criminally-involved youth show complex race and sex trends. Nonwhites as a group are more likely to be incarcerated in the more restrictive correctional settings. Females are more likely to be placed in schools and detention homes than males. Nonwhite females are more likely than white females to be incarcerated in all three of the correctional institutions, especially in training schools for the juvenile delinquents.

In the case of institutions for the mentally retarded, whites exceed nonwhites overall. However, while for white males and females the trends from 1950-1970 show increases followed by decreases, for nonwhite males and females the trends are steadily increasing.

Similarly, in the trends for the institutionalization of children in homes for the neglected and dependent, we find that white children clearly exceed the number of nonwhite children in such homes. However, the twenty-year trend for whites shows decreases, while for nonwhites increases are shown from 1950 to 1960, followed by decreases in 1970.

Finally, looking at the rates of institutionalization of teen mothers in homes for unwed mothers we find some of the lowest total number of residents across both races. The rate differential for white and nowhite females are, however, quite different. For white females the rate dropped

from 1950 (9.5) to 1960 (7.6), and began to increase again by 1970 (8.1). For nonwhite females, on the other hand, the rates have been steadily increasing since 1950 (5.8, 8.7, 11.2). (See Table 5 for detailed statistics.)

These nonpsychiatric hospitalization trends suggest that across the board, psychiatric and social difficulties experienced by nonwhites are increasingly responded to with institutionalization. The primary case settings are increasingly psychiatric institutions and institutions for incarceration.

Kramer (1977) identifies several factors to account for the changing institutionalization trends in general. Among these are: 1) social legislation that shifted certain types of patient populations from state psychiatric hospitals into community and private settings, 2) new treatments, 3) general demographic changes that increased the number of children overall, as well as those at risk for psychiatric disorders, 4) social conditions and problems such as unemployment and poverty which are also associated with increases in crime and increases in arrests and incarceration, 5) racism and other discriminatory practices that result in the differential treatment of disorders as a function of race, and 6) insufficient and inadequate community programs.

These explanations offer a superficial analysis of the various interacting factors that produce both the disproportionate incidence and prevalence of the psychiatric disorders, and the pattern of intervention. A more detailed review of the factors and an analysis of the processes leading to these outcomes are necessary to appreciate the implications of these data fully. Let's proceed, therefore, to review some of the principal models in the field that try to account for the disproportionate rates of psychiatric casualties among the offspring of Black and other ethnic minority groups and the poor.

MODELS OF MENTAL HEALTH AND ILLNESS: THE CAUSAL DEBATE

One's theories or assumptions either explicity or implicitly guide one's methods and actions. If we examine the theoretical perspectives of American society we may find reasons for society's perception of mental health among Black children and youth and indeed an explanation of society's responses.

In a very provocative article, Rainwater (1970) identified five conceptions of the poor or the "disinherited," and described the treatment approaches which they spawned. The conceptions were: 1) the moralizing, 2) the medicalizing, 3) the apotheosizing, 4) the normalizing, and 5) the naturalizing. The first four are combinations of two basic dimensions: potency (i.e., the poor are either weak or they are potent) and virtuosity (i.e., the poor are basically either virtuous or evil). The fifth perspective combines the essential elements of the other four and extends them to their logical conclusion.

Moralizing. According to the Rainwater analysis, the most basic perspective on poverty is the moralizing that characterizes the disinherited urban Black as evil and potent. The urban Black poor are basically evil and sinful and drawn to a "less civilized" way of being in the world. As such, therefore, they tend to gravitate to environments were debauchery, sin and immorality are the rule (i.e., the drug addiction, broken families, school failure and the other negative features of these environments are legitimate by-products of this state). The victims by "social standards" are sinful and need to be "saved."

Medicalizing. The second perspective, the medicalizing or medical model, characterizes the urban Black poor as essentially evil and weak (i.e., sick,

helpless products of their unhealthy selves and unhealthy environments). The central theme in this perspective is that the lives of the poor and Black reflect the pathologizing of normal personal and social processes. Both the individual (i.e., the Black child) and the social institutions (i.e., the Black family, the Black community) are sick. Primary emphasis in this perspective is on "psychopathological persons": the causes of problems are attributed to deficits in the personality and the cognitive and emotional structures of the individual Black child. This is different from the moralizing perspective in which the primary causal agent is the inadequate Black family and community: the root cause is not seen as individual pathology, but rather, social disorganization and social pathology (i.e., the pathological cycle of poverty in the ghetto culture).

Much of social science and mental health evolves from the medicalizing perspective. We can characterize most mental health theory, research and practice as "psychopathologizing," insofar as the primary basis for the analyses of the causes of emotional and behavioral disorders rests on the psychodynamics of the individual. The environment is generally considered as a pathological context that contributes to the development of a distorted, inadequate ego in the individual. Thus, for example, Black child abuse, Black youth violence, Black youth suicide are all explained as the products of fundamental deficits in the character structure of the individual child or parent. These deficits result from the deleterious influences of a pathologizing environment.

The social responses (i.e., treatment) that evolve from this pathologizing perspective emphasize the diagnosis of "disease" in the child and family and prescribe clinical interventions to achieve symptomatic relief. The pathology assumed to be endemic in the environment is usually ignored because: it is too

difficult and falls outside of the expertise of the social scientist and mental health practitioner.

Apotheosizing and Normalizing. The third and fourth perspectives, the apotheosizing and the normalizing, characterize the urban Black poor as essentially virtuous. The negative experiences of poverty and oppression in the first case (apotheosizing) serves to create a striving individual and culture engaged in a perpetual struggle for survival against insurmountable odds. From this struggle emerge special skills, life styles, philosophies, and a special quality of existential humanity, all of which help the child adopt to the stark reality of ghetto living. From the apotheosizing perspective, therefore, Black language, cognitive styles, and behavior patterns represent healthy, adaptive attributes forged within the context of a vibrant and creative Black culture.

The normalizing perspective, on the other hand, denies the concrete reality of being Black and poor as having any meaning and significance in accounting for Black behavior and mental health. This perspective starts from the basic premise of the "equality of all people." The assumptions are that although Blacks may have been discriminated against, the effects of these experiences over several generations are essentially minor. What character, cognitive, emotional and behavioral differences exist between Blacks and whites are basically superficial; minor variations exist in form and expression, not in substance. The material and social restrictions Black children have been forced to live under are not assumed to be severe enough to have had any lasting effects on the internal dynamics of Black individuals and families, or on the transactions between Blacks and the larger society.

The basic model of intervention suggested by these two perspectives can be parsimoniously described as "nontreatment," or ignoring the existing social

conditions and simply letting the natural creative and generative energies of Blacks take their course.

Both of these positions, and especially the apotheosizing, can be found in the writings of liberal white and Black social analysts. While they do not attribute the current mental health status of Blacks either to moral decadence or illness, they nevertheless confuse important issues and include erroneous assumptions. First, they include the assumption that: we are all basically the same (i.e., equal), and if given the right opportunity we would all rise to our natural level in society. In reality, we must distinguish between "existential equality" and "functional equality." Existential equality is an ideological principle that affirms the essential humanity of people and the rights of each to be granted the same respect, value, and opportunity to live fully. Functional equality, on the other hand, is based on performance: i.e., what the individual is capable of accomplishing based on ability, effort and opportunity to function within our social structure. This is a political dialectic: i.e., natural, personal attributes are influenced by politically structured options, opportunities, barriers and constraints which help develop attributes. Failure to acknowledge this critical interaction reduces the ideas articulated by these two perspectives to insubstantial, platitudinous statements.

Second, they confuse adaptation with health. While the moralizing and medicalizing perspectives characterize Black behavior as essentially negative and pathological, the apotheosizing and normalizing views commit the error of reacting to the deficit model by postulating its opposite (i.e., strengths and assets). This approach, while more palatable, still fails to portray reality accurately and honestly. While Black children are not essentially deficit-ridden, by the same token neither are they heroic, striving creatures.

Their efforts to adapt and cope in the face of great odds is admittedly heroic. However, adapting to oppression comes at a price, one which often entails the development of strategies to avoid extinction. But these strategies do not allow for mastery and for truly creative development and growth. Thus, it is not sufficient in the fostering of the mental health of oppressed people simply to reaffirm culture and advocate greater opportunities. It is necessary to radically remove the internalized "mentality of the oppressed" and to radically restructure the social order to allow for the free development and growth of all people (Fanon, 1967).

Naturalizing. The fifth and final perspective as identified by Rainwater is labelled the Naturalizing. This viewpoint is advocated by those who attempt to assess the causes of the behavior of Blacks and the poor from a presumably value-free position. The assumption made is that science with its objective and value-free methods can ascertain the "truth" about Black behavior by comparing it against the "universal standards for all human behavior." Two major themes coexist under this heading: biological or genetic determinism and cultural relativism.

According to the genetic determinist, there is "scientific evidence" to support the contention that the poor and Blacks are biologically different (i.e., inferior to the more affluent and to whites). This genetic difference is used to explain why many urban Black children fail at many socially defined development tasks, and why they are disproportionately represented among "the mental health" casualties. The genetic determinist further assumes that the biological deficits serve as immutable barriers to the successful participation of Black children in society. Therefore, expectations and aspirations should be accepted as fact (Jensen, 1969). This perspective is particularly evident in the work on the intelligence and cognitive capabilities of the Black child.

All deficits identified in the Black child whether behavioral, emotional, cognitive or physical are attributed directly to fundamental, natural, biological weaknesses that impede the child's effective functioning and healthy social adjustment. Therefore, no amount of manipulation of social and environmental conditions can overcome the immutable effects of this biological barrier. Therefore, Black children are doing as well as can be expected given what they have to work with.

The cultural-relativism perspective, on the other hand, views the behaviors and social systems of the Black poor as perfectly valid entities in their own right. Black children are neither inferior nor superior to whites; they are simply different. Black language, cognitive styles, behavior patterns and value preferences are adaptive to the Black world. Therefore, Black behavior should be evaluated within the context of the Black culture and not against standards developed to assess the behavior of whites. Those who assume universal norms of behavior and use assessment tools normed accordingly are committing a transubstantive error [i.e., they are assuming that the substance and meaning of concepts, images and behavior are "essentially the same" across cultures because they are "similar" in form (King, 1978)].

Like the apotheosizing perspective, the cultural relativist position affirms the essential difference of Blacks. It is similarly limited in its analytic position by its failure to locate the present status of the Black child organically within a concrete historical reality. The Black child is different from the white child in terms of culture and historical roots (i.e., African vs. European). The differences also result, however, from the fundamentally different existential positions of the Black child and white child in this society. White children develop within a concrete social reality defined as white. The obstacles that they may face can be attributed

to their social class, sex, or religion, and ultimately to their individual abilities. Race for the white child is not an existentially meaningful entity. It is in fact a minimum common denominator taken for granted.

The Black child, on the other hand, begins with a dual existential reality: to be Black and to be American (Dubois, 1903). Race is an existential factor that is primary. Being Black sets the tone of one's existence throughout the entire lifespan. As our data bases clearly show, the cards are often stacked against the child primarily on the fact of being Black. Additionally, the factor of social class for Blacks appears to multiply the effect of race (i.e., race x class). As we noted earlier, to be Black in America is difficult; to be Black and poor is disastrous. Add sex, religious ideology, and individual capacity to this reality, and we get a more accurate picture of the true basis for the differences between Black and white children.

Therefore, the cultural relativist perspective is humanistic but limited as a perspective for analysis. It is significant also to note that although they attribute the causes of Black behavior to different things, the cultural relativist (difference) and the genetic determinist (deficit) prescribe similar solutions (i.e., leave the Black child and the Black family alone). The perspectives differ, of course, in the motivation for the "hands off" policy (i.e., cultural differences vs. limited ability) and the different social policies (cultural pluralism vs. cultural elitism). Nevertheless, according to these viewpoints, the mental health of the Black child should ultimately reach "normal" level if we assume a noninterventionist position.

From these five perspectives we see the Black child as both hero and villain; as both superior and inferior; as both the normal product of an organized social response to oppression and as a pathological deviation from the normal social order. Black society is simultaneously evil and decadent;

vibrant and heroic. It simultaneously provides a healthy context in which necessary survival skills are learned, and a context that handicaps people and encourages incompetence. The fact that these unexamined contradictions have coexisted without resolution for several decades is in part responsible for our failure to devise a means of grasping the reality. We shift between positions without a heightened consciousness informed by an understanding of history. We have no method for analyzing and understanding the historical reality, and therefore no vehicle for transforming our children and youth.

New Perspectives. In a recent paper, Myers & King (in press) challenge these prevailing explanations of Black mental health and propose a reformulation. This reanalysis begins by recognizing that the responsibility for the failure of our social programs must rest at least in part with the scientific community and our failure to examine the roots of the assumptions, concepts and methods used in analyzing social phenomena. Although social science is not the only force influencing social policy, it nevertheless plays a critical role in defining the nature of social problems and in directing the formulation of social responses. An illustrative case in point is the infamous Moynihan report on the Black family (Moynihan, 1965), which provided the scientific justification for the Nixonian policy of "benign neglect." In a recent compilation of fifty years of published social science research on the Black child (Myers, Harris and Rana, 1979), the authors provide documented evidence of the rigid and narrow definition of Black child development and mental health as essentially negative products of deficits in the child and in the Black family. What was clearly absent in this voluminous body of research was 1) a conceptual and empirical specification of the fundamental problems and 2) the role of social scientists in helping set policies and practices that establish the conditions which can lead to different outcomes.

An analysis of the mental health condition of the Black child or youth must look at the interactions between the child and the social context. Human development depends on this reciprocal interaction. The Black child is born into a social context -- familial as well as economic -- which must be understood and revealed. The psychology of the Black child is a product of the dialectical interactions between the child and his/her social space.

There is no question in my mind that Black children are being devastated. I remain amazed at the creativity and ingenuity of all the children who survive these conditions. One of the major premises proposed by Myers & King (in press) is that there is a "deep structure," coterminous with the capitalistic social order, that maintains the social conditions in which a large number of Black children must live. That is, there is a history of economic and social exploitation, designed to benefit the few, which contributed to creating the present situation.

A second major premise is that the child who is part of these social conditions interacts with, changes and is changed by these conditions. The changes brought about by the child, however, are insufficient to balance the changes imposed on him or her by the society.

A third major premise is that the influences on the child by the society, generally labeled stress conditions, are mediated internally by the child through coping strategies which we dimensionalize into mental health states of well-being.

The basic debate among scientists faced with accounting for the mental health of Black children lies in how the critical causal factors (i.e., genetics vs. environment) are specified and how predictive models that specify the nature of the relationship between these factors and the mental health outcomes are formulated. The model for the analysis of the mental health

of Black children which Myers and King proposed draws upon two distinct theoretical sources: 1) the theory and research on urban stress and its effects, and 2) the theory of social dialectics of oppressed and colonial people as articulated by Frantz Fanon. These two perspectives share in common an emphasis on the appraisal and adaptive processes within the person, and the transactional processes between the person and the sociopolitical environment to predict mental health outcome.

The Urban Stress Model of Mental Health

In a series of very provocative articles, Dohrenwend (1961, 1967), Dohrenwend and Dohrenwend (1969, 1970) and more recently Myers (1976; 1977a, b; in press) review available theoretical literature on psychosocial stress as a way of analyzing the epidemiological findings on the physical and mental health of the poor and ethnic minorities. The basic paradigm consists of an elaboration of the Selye (1950, 1974) and Lazarus (1966, 1974, 1977) models of the stress-adaptation process as a precursor to disease and system malfunctions. The paradigm contains six basic elements:

1) Exogenic and endogenic antecedents, defined as the factors that contribute to defining a basal level of stress usual for the individual or group.

2) Internal and external mediating factors, which are the factors that increase or decrease the relative impact of the stress.

3) Eliciting stressor(s), the objective stressful social stimuli that require adaptation or change in the usual level of functioning.

4) The resultant stress state.

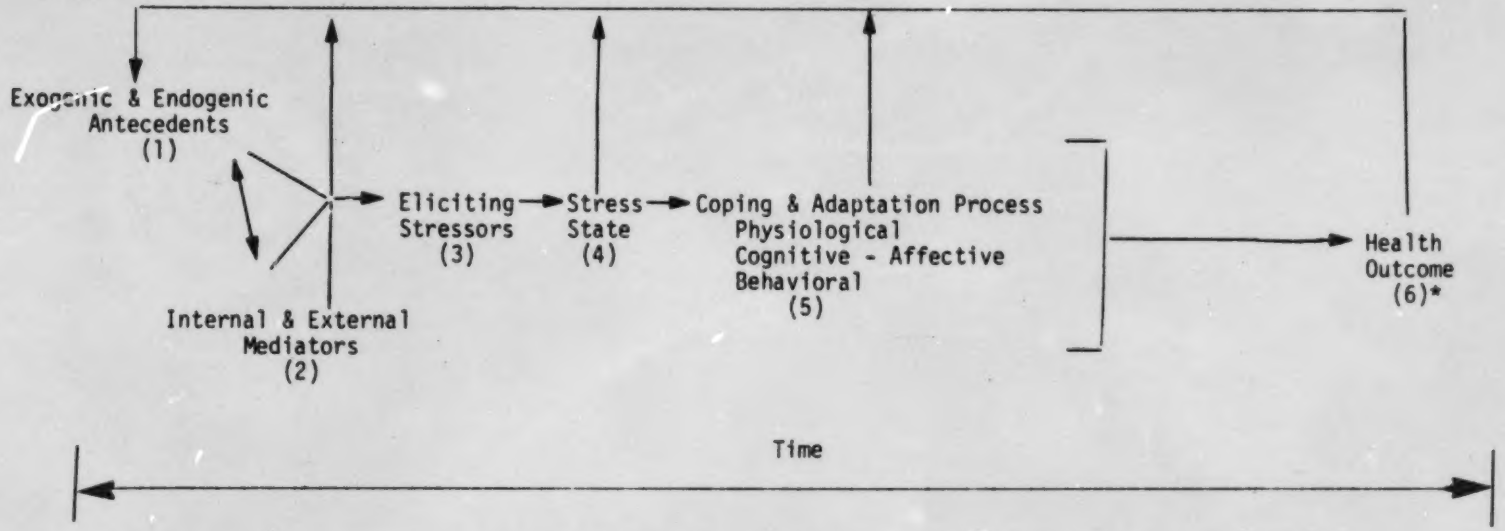
5) The adaptation process, the complex physiological, cognitive-affective and behavioral response process of coping with the stressor.

6) The health outcomes, a result of the coping effort. (See Figure 1.)

Several assumptions are made in this paradigm. First: the greater the amount, intensity and duration of the stress experienced, the greater the likelihood of illness and the greater the severity of the disorder (Holmes and

FIGURE 1

Simplified Conceptual and Research Paradigm
Depicting the Role of Stress in Health & Illness



*(6) Represents both the point along the Health (+) -- Illness (-) continuum as well as the specific disorder(s) that may result

Rahe, 1967). Second: the amount of stress experienced and the severity of the impact of stress are related to factors of social class and race (Dohrenwend and Dohrenwend, 1970; Myers, 1976). Third: the impact and meaning of any stressor or class of stressors is influenced by internal and external mediating factors related to the person's social class and ethnic background. Fourth: the person's or group's state of relative health can be meaningfully predicted from his or her race and social class stress dynamics (Myers, 1976, 1977a).

Following an extensive and critical review of the theoretical and epidemiological literature on Black mental health, I feel the urban stress model suggests that individuals who are both Black and poor are exposed to greater amounts of stress and are often forced to cope with detrimental stresses over an extended period of time. Consequently, the severity of the impact of these stresses on their lives is substantially greater than those experienced by whites as a group. (See Myers, in press, for a detailed presentation and analysis of this model.)

The Social Dialectic Model of Mental Health

The urban stress model accounts for the incidence of mental illness among groups as a function of social class and race-related exposure to stress and stress-coping efforts. Primary emphasis in the analysis is placed on the degree to which the individual is affected by the stress endemic to the environment as mediated by his or her personal assets and coping styles. External sociopolitical factors are important, but are viewed as secondary mediating factors that influence both the amount of stress exposure, as well as the relative impact of that stress on the individual. However, the stress model stops short of articulating precisely how the external context of reality predetermines the degree of susceptibility to mental disorder. Similarly, with its emphasis on coping and adaptation, the stress model does not articulate a social-change strategy. Thus as a

model of mental health for the urban Black child it is still not complete enough for our purposes.

Therefore, in elaborating an alternative model of mental health for the urban Black child, Myers & King (in press) looked to the dialectical analyses of the mental health of colonial societies in the Caribbean and Africa as articulated by Frantz Fanon. Fanon (1965 a & b; 1967 a & b), the Martinican psychiatrist, elaborated a "color x class" analysis of the colonial society as the critical dynamic that defined the state of mental health of the society. The mental health of colonial societies was broadly defined as the product of the dynamic between the institutionalized interests of the ruling classes and the identity-defenses and ego elaboration of the oppressed masses. Central to this dynamic was the systematic negation of the values, life styles and culture of the oppressed masses by the ruling classes, and the imposition of the ruling classes' culture, values and standards.

King (1978) applied this analysis to the mental health of urban Black communities and affirmed that "the present mental health dilemma (of the urban Black child) is not (simply) one of personal maladjustment, but rather of class conflict and of crisis, in the historicity of society" (p. 3). It is indeed incomplete and misleading to account for the mental health statistics on the Black child as reported earlier simply on the basis of their presumed greater inherent maladjustment or greater psychological vulnerability. Both of these explanations continue to ignore the critical conflicts and contradictions in the sociopolitical situations in society that operate oppressively on the excluded members of society to create the state of vulnerability and high casualty rates which we see.

King notes further that if we accept the personal maladjustment concept as central to our analysis of the mental health of the Black child, then we

also implicitly assume that we live in a positive, growth-enhancing social structure to which all members of society should ideally adapt in order to function optimally. However, even a cursory analysis of the peculiar history of Black Americans would suffice to belie that assumption. The history of the transactions between Blacks and the larger American society is one characterized by exclusion from full participation, oppression, and alienation. To this Blacks have developed response systems characterized by mistrust, fear, hostility and reactive rejection. This peculiar transactional process between oppressed and oppressors results, as suggested by Fanon, in the creation of a disinherited people condemned to a marginal social and psychological status, trapped ambivalently between self-affirmation and self-denial; between idealization of the oppressor and condemnation of that oppressor.

On the other hand, this transaction also creates a social minority of the inherited (i.e., the ruling class) who are deluded by their false sense of superiority; are blind to the ethnocentric, self-serving value basis of their evaluations of the oppressed; and are trapped in an oppressive self-perpetuating social structure.

The analysis of mental health in a class-caste society such as ours cannot, therefore, be made simply on the basis of the presence or absence of illness symptoms. Rather, it must necessarily include the analysis of the transactional processes between individuals, social classes, and the social structures that create the conditions of mental health vulnerability within particular social classes and races. Similarly, mental health cannot simply be defined on the basis of adaptive capacity, because in societies with oppressive institutional practices, adapting to the reality must include an active commitment to personal and social transformation.

Consistent with these premises, the social dialectic model of mental health defines a two-factor matrix that structurally represents the dialectic between the psychological state of the person as it is influenced by the external social structure, and the nature of the transaction between the person and the social structure. This dialectic evolves developmentally in the individual and historically in the society.

The first factor in the dialectic defines the internal state of harmony or disharmony in the individual as influenced by external social structures. The person can be said to be in a state of high or low crisis to the extent that there is an internalization of external oppression. Thus, for example, the individual who by virtue of his or her social class or color is in a state of struggle and disharmony and engages in self- (or other-) destructive behavior as a result of this state of struggle can be said to be in a state of high crisis. If, on the other hand, social class and color oppression is acknowledged but successfully circumscribed such that a significant state of internal struggle does not develop and behavior is not self- (or other-) destructive, then the person is said to be in a state of low crisis.

Similarly, the second factor in the dialectic, the nature of the transaction between the person and the society, can be dichotomized so that it is consistent with the degree of the developed sense of conflict central to this transaction. If the individual has a heightened awareness of the fundamental structural contradictions in society and is actively engaged in a struggle to articulate and remedy these contradictions, then he or she is said to be in a state of developed conflict. If, on the other hand, there is little awareness of these structural contradictions, and little or no concern for understanding and correcting them, then he or she is said to be in a state of undeveloped conflict.

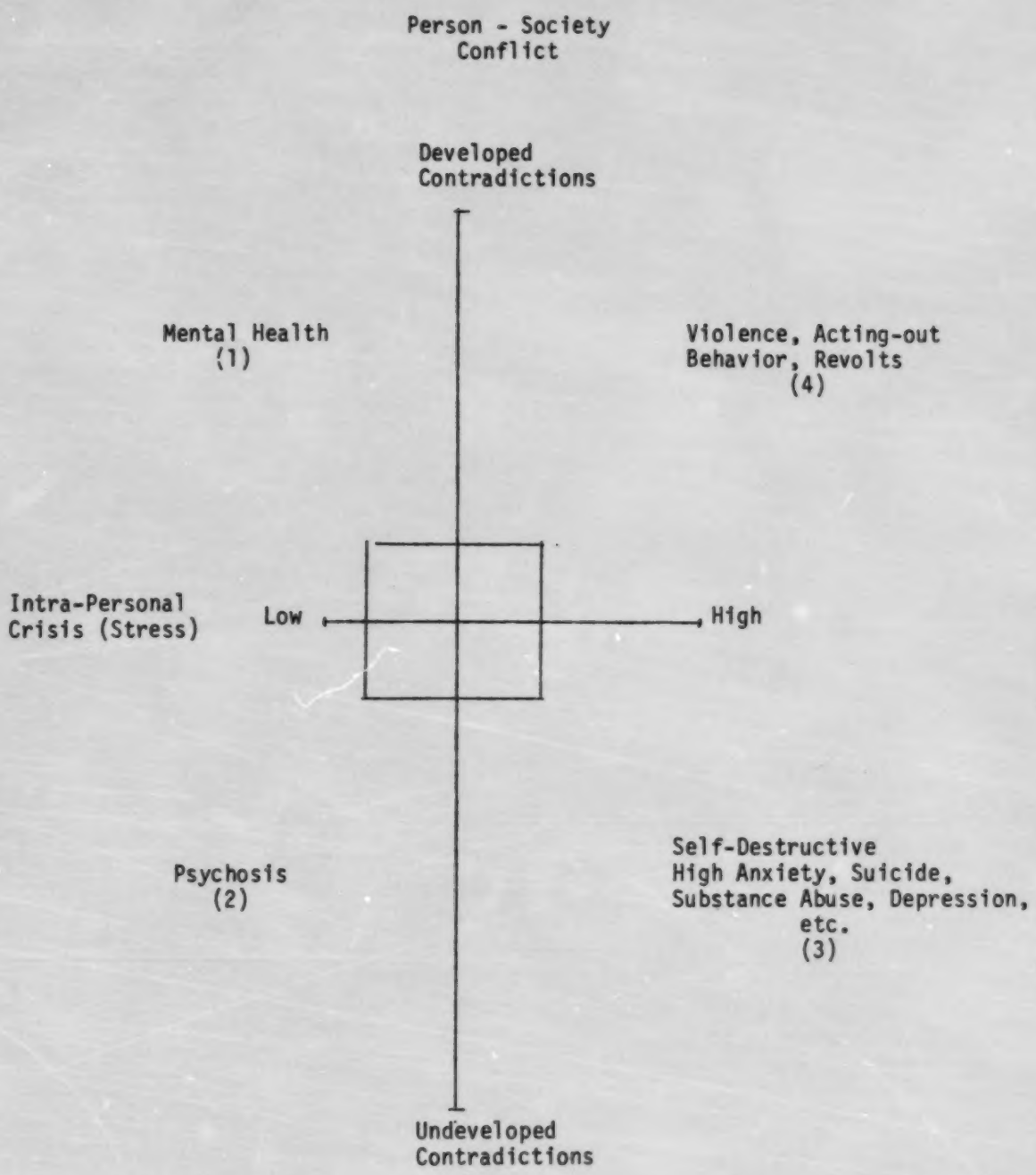
In this two-dimensional matrix, a state of mental health 1) exists when there is both low personal crisis (i.e., low stress) and a developed consciousness of and conflict with the contradictions in the social structure. The other three conditions resulting from the combination of these two factors represent states of mental disease, i.e.: 2) low crisis and undeveloped conflict = psychosis; 3) high crisis and undeveloped conflict = anxiety, suicide, depression, substance abuse, etc.; and 4) high crisis and developed conflict = violent outburst, acting-out behavior, mass revolts, etc. (See Figure 2.)

The dialectical and stress models emphasize the transactions within the person (inner conflict) and between the person and the society as the basic units of analysis predicting mental health outcomes. The treatment approaches informed by these models focus on individual habilitation and effective coping, on the one hand, and system change (i.e., social transformation) on the other hand. The former reduces the state of crisis within the individual, and the latter heightens the contradictions between person and society and fosters the resolution of these conflicts.

APPROACHES IN MENTAL HEALTH TREATMENT PREVENTION

The articulation of theoretical models in mental health is a relatively easy process. Developing the implementation programs, however, is a much more complex and difficult task. Despite the variety of theoretical propositions in the mental health field, the vast majority of mental health programs are treatment programs almost exclusively dedicated to remediating individual disfunction. Very few can be characterized as preventive in nature, where the stated goal is to identify and remedy those conditions that are known to be implicated in the development of emotional disorders (e.g., early malnutrition, child abuse and neglect, inconsistent and contradictory parental communication and behavior, etc.).

FIGURE 2
Dialectic Matrix of Mental Health



Two programs in the Los Angeles area which I have had the priviledge of knowing are refreshing illustrations of intervention approaches, directed at low-income Black children and youth, that combine both direct treatment and primary prevention strategies. These are the children's Early Identification, Consultation and Training Program (Part F) at Central City Community Mental Health Facility,[1] and the South Central Los Angeles Child Development Center.[2] The former is a primary prevention program funded by the National Institute of Mental Health and operating out of a large, Black comprehensive community mental health center. The latter is a small, intensive infant-nursery program for the offspring of teen parents that is affiliated with a Black inner-city Los Angeles high school.

The Central City Primary Prevention Program

The Central City Part F program was conceptualized and implemented as a comprehensive treatment and prevention program addressing the myriad mental health needs of low-income, Black children and their families in South Central Los Angeles. The program was established in 1972 by an eight-year staffing grant from the National Institute of Mental Health and charged with the task of providing mental health consultation, education, and training to community caregivers in their catchment areas. Conceptionally, Part F was designed as a comprehensive, multidisciplinary program including the following services:

1) Direct psychiatric services to emotionally afflicted Black children and their parents.

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[1]The author was the Director of this program from 1973-1975 and has continued to serve as a research and program consultant. Appreciation is given to Mrs. Annabell Williams, the present Director of the program and her dedication to the task of this program.

[2]The author is grateful to Mrs. Patricia Nolcox, Director of the Child Development Center, for her assistance in preparing this manuscript.

2) Mental health consultation and training to the teachers and other personnel at local preschools, Head Start programs, and in the elementary, junior high and senior high schools.

3) Community organization, mobilization and outreach projects in a low-income housing project.

4) Consultation and training to other community caregiving programs, including adoptions, private foster parents, health care centers and juvenile justice programs.

5) A comprehensive teen parent's program serving the teen parent, the offspring, the families of origin, and consulting with the staff of the continuation schools that the pregnant teenagers are referred to.

The teen parent's program was developed as a family-community systems model (Myers & Colbert, 1974) addressing the complex issues of the problem of teenage parenting in Black communities. As noted by Menchen (1975) and Baldwin (1976), teenage pregnancy is an endemic problem in low-income, nonwhite communities. The race differential in fertility rates for girls ages 14-19 is very striking at all age levels; the nonwhite rate exceeds that of whites. For girls under 14 years of age, the nonwhite fertility rate is slightly less than twice that of whites (158 vs. 82).

Unlike many programs that focus almost exclusively on the teen mother and her infant and address specific areas of need (e.g., physical health, mental health counseling, etc.), the Part F teen parenting project conceptualizes early pregnancy as a problem and crisis of the entire family system and community. As such, therefore, all affected individuals are targets for assistance. Furthermore, teen pregnancy is seen as influencing all aspects of the adolescents' lives, and requiring, therefore, interventions in the educational, social health, mental health, parenting, and community spheres.

The problem of teen pregnancy and associated consequences for the adolescent, the infant, the family, and the community are also believed to require aggressive and coordinated prevention strategies. These include

the education and habilitation of the teen parent to prevent future pregnancies, to reduce the developmental risks of their offspring, and to prevent the long-term economic and social handicaps which the teen parent faces. The prevention strategy also addresses the needs of the families of origin by assisting them in making healthy adjustments to the pregnancy, and by providing them with the information and support necessary to prevent future pregnancy experiences in their younger sons and daughters.

Finally, the project also intervenes with schools, churches and community social agencies and programs to help them develop effective education, counseling and socialization programs for Black teens around the issues of sexuality, contraception, personal responsibility and choice, and personal worth and decision-making.

After eight years of service, the Part F program has provided consultation and education to several dozen agencies, has established ongoing working relationships will all of the public and private preschools through senior high schools in its catchment areas, and has served over 500 Black teen mothers, their infants and families.

The Locke Infant Center -- School-Aged Parent Program

The Locke Infant Center was founded in 1975 with a grant from the state of California (under its School-Aged Parent Program). The Center is affiliated with three local Black inner-city senior high schools and provides an intensive program of parenting education to Black teen parents, and child care and development services to their infants. The program combines didactic and laboratory parenting intervention and training approaches, along with health, nutrition and psychosocial counseling services.

Unlike the Central City Part F teen parents project which utilizes a more global intervention strategy, the Infant Center focuses more intensively on the

Black teen mother-infant dyad. Each teen mother is enrolled with academic credit in a parenting class where issues of child development and effective parenting are taught. In addition, the mothers spend several hours in the infant lab with their's and the other infants learning to feed, clean, change, interact and stimulate their baby, and recognize and respond appropriately to his or her needs.

The infants in the program spend the day in the nursery while their mothers are attending classes. They each are assessed and monitored in terms of their developmental progress and their health. Specific interventions are designed for each infant to correct whatever delays or problems are identified and to enhance his or her sense of self-worth, growth and development. The infants generally range from age two months to one year, and often may spend several years at the Center if their mothers conceived and delivered while they were sophomores or juniors.

Preliminary statistics show that over the five years of the Center's history, 372 teen mothers and 373 babies have been served. Of those, over 80 percent of the mothers completed the program and their education through to graduation, and approximately 90 percent of these girls obtained some post-high-school education or went to work. Only a very small percentage (.05 percent) of the girls were recidivist (i.e. 4 girls in 5 years). This percent is substantially lower than the recidivism rate for low-income Black teen parents as a group (i.e., estimated at close to 10 percent for high school parents and maybe as high as 30 percent for girls conceiving prior to age 15) (NCHS Report, 1976, p.6). The program has also served 72 nonparent teens, none of whom have subsequently become pregnant.

Of the infants served, preliminary data suggest that while they are at the Center and participating in its program, they show markedly accelerated patterns

of development in all areas. This is true even for premature infants and infants that showed early developmental delays. Children with congenital defects, however, do not show this pattern of accelerated development (Myers, Davis-Gaddis, Phillips, Epps, and Nolcox, in preparation).

These two illustrative programs clearly illustrate that whether the primary program emphasis is mental health (Part F) or education (Child Development Center), effective treatment and prevention results can be obtained with low-income Black children and youth if multidisciplinary and multimodality approaches are used. Strategies must address the range of needs of the whole person, and have an impact on his or her whole world, including familial and community systems.

RECOMMENDATIONS FOR FUTURE PROGRAMMING

In this chapter I have briefly presented an overview of the present state of Black child mental health as reflected in the available treatment statistics and briefly reviewed the theoretical and philosophical perspectives in the field. I have described two intervention/prevention programs which address the problem of Black teenage pregnancy and parenting. The evidence sounds an alarm. As a group, Black children are at great risk for mental and physical disorders due to the continued deterioration of their social, economic and political conditions.

Programs to reverse this dangerous trend are sorely needed. However, the lessons of the past and present must be studied to inform the future. Programs that are singularly focused at soothing the pain and correcting the deficiencies of individual Black children are necessary, but are only temporary and short-term in their impact. As we have seen in the statistics presented, the present "treatments in vogue" for the mental health needs of Black children are hospitalization and incarceration. Future programs must be

developed to serve as effective alternatives to institutionalization, and must focus more on prevention than on treatment and remediation.

Principal programmatic needs rests in the areas of 1) early intervention to prevent teen pregnancies, 2) programs to improve the effectiveness of Black parenting, especially among the most oppressed segments of the Black community, 3) programs designed to reinforce and support Black family systems to make them more resistant to the negative impact of oppressive economic and social conditions, and 4) programs designed to foster effective coping skills, leadership and resilience in black children and youth, rather than emphasizing remediation and the correction of deficits (i.e., strength-enhancement programs).

If I may paraphrase Fanon (1967), there comes a time when silence is dishonest. What matters is not simply to know and describe the world of the Black child with all of its vicissitudes, obstacles and resulting negative outcomes. Rather, the need is to conceptualize the insidious process of manufactured disease and disfunction clearly, and to change it so as to foster the development of new and healthy Black children.

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CHAPTER 7

FOCUS FOR THE FUTURE

by ELOUISE JACKSON

The preceding chapters examined key issues currently affecting service delivery to young Black exceptional children and their families. Following the discussions of each of their topics, the authors recommended ways for beginning to rectify the situations discussed. Unfortunately, we have been able to pinpoint only a few of the important issues in Black special education in this book. In this chapter, we want to focus on other areas that need immediate attention. We will give particular emphasis to three areas: research, personnel preparation, and program reformation.

AREAS OF FUTURE CONCENTRATION

Research

Research helps guide program development and educational practice. The information it provides helps direct modifications of or changes in present practice. Because it is an area in which activity has great potential to bring change, research with regard to the young Black exceptional child and his/her family is critical. Several topics desperately require study.

One area that needs much investigation is teaching strategies. With the current in-depth system of gathering information about exceptional children, background information including assessment and observation data is more readily available than ever before. Careful analysis of this information, which provides educators with insight into the child's background, strengths, weaknesses, learning styles and preferences, can

provide an opportunity for researchers to investigate a variety of teaching techniques to isolate those most successful in encouraging and facilitating competence and intellectual development in the Black exceptional child. Areas of investigation would include the implications of using certain instructional strategies in relation to a child's particular learning style or the responses of children to certain teacher behaviors (such as the teacher's handling of a student who speaks nonstandard English -- i.e., whether or not the student's eagerness to participate in language and other expressive activities is affected by that behavior). Such research endeavors should begin to generate the kind of information necessary to encourage change in instructional approaches and subsequently in child progress and professional attitudes.

A second area for investigation is research on the strengths of Black families. Here several topics can be examined, one being parent/family reactions to the birth of a handicapped child. There is evidence which suggests that families of culturally-diverse handicapped children do not fit the stereotype generally associated with parents of handicapped children. According to Marion (1980), studies have shown that these families, especially Black and Mexican-American families, do not express shock, disbelief, sorrow and other associated feelings of guilt and depression (Luderus, 1977; Marion and McCaslin, 1979). Rather, feelings of protection and acceptance are more typical emotions. The role of the extended family, religion, and the feelings of acceptance and security engendered within these families demands much attention.

A third research area is that of identifying and nurturing giftedness in the young Black child. Too often research is concerned with relating negative attributes to the Black child and his or her family: i.e.,

identifying deficits within the child (Williams, 1974), suggesting pathological family conditions (Minuchin, et al., 1967) or attributing inferior characterizations to children's intellectual abilities (Jensen, 1969). Due to much of this kind of research, the creativity and potential of many Black children has been thwarted and misdirected under the label "behavior management problems." In focusing on giftedness and talent in the Black child, research should be conducted to identify indicators which suggest the presence of a child's talent in various areas (e.g., academics, arts, etc.). Going a step further, research should also involve examining ways to successfully foster children's talents.

A fourth research emphasis is parent/family involvement. Parents should be involved in all areas of their child's program. Marion (1980) identifies three areas of need regarding parents of culturally-diverse gifted and handicapped children. These needs areas are: 1) the need for information, not only about the basic tenets of Public Law 94-142 but about their rights and responsibilities as well; 2) the need to belong, to feel an alliance to parent organizations and other special groups; and 3) the need for self-esteem, to feel a sense of being understood and having one's feelings and concerns responded to promptly and constructively. By having an understanding of these needs, professionals can expand their roles in the communication process with parents more effectively. With particular regard to Black parents, and especially those frequently labeled "hard-to-reach," research should give considerable attention to these need areas and investigate different methods and techniques for successfully involving Black parents. The results of such inquiries may greatly enhance the parent-involvement process as it currently exists today and begin to break down barriers that separate parents and professionals.

A fifth focal point is the study of the Black parent/infant dyad. Researchers have approached this topic from a variety of viewpoints. Some have examined environmental differences in an effort to understand more clearly the nature of different home environments and differences in child-rearing practices. Others have concentrated on the effects of different child-rearing practices on the infant's cognitive development. Still others have attempted to demonstrate the effect of various stimulation/intervention strategies on the intellectual development of infants. The difficulty with such studies is that for the most part they assume a "deficit model" or "inadequate" child-rearing practices. Many such studies have used biased measures (e.g., those based on middle socio-economic-status value systems). Such factors as the prevailing system of social stratification that has detrimental effects upon minorities as a whole and Blacks in particular have virtually been ignored.

Research should be conducted which takes into account differences in conditions and circumstances surrounding the lifestyle of the Black child and his or her family. Initiating more research based on a holistic view of what takes place within the environment of infants can provide information that begins to account for differences in developmental outcomes.

Finally, there has to be more effort and involvement on the part of Black professionals in the research field. In order to examine various issues and topics related to Black exceptional children and their families, persons of the same ethnic origin have to become involved in determining issues to be addressed and appropriate research approaches to be used. This involvement is particularly important in determining research direction, improving the validity of the research, and assessing more accurately the meaning of research findings.

Personnel Preparation

Coppock and Birckhead (Chapter 4) elaborated on the areas of preservice and inservice training. Both areas are crucial in terms of their effects on teachers and administrators. Too, it is at these pivotal points that program services for Black exceptional children can be strengthened by other means.

During preservice and inservice training, the awareness and knowledge of teachers and administrators can be heightened concerning the nature and culture of Black children and their families. It is of utmost necessity to include information of this kind in training efforts to replace stereotypic ideas and ignorance on the part of professionals. Exceptional Black children and their families can have more problems as a result of professionals' attitudes than those problems brought on by the specific handicapping conditions. Negative attitudes and lowered expectations can lead to misreferrals, misdiagnoses and misplacements of Black children in special education programs.

During training efforts all professionals should be exposed to information that would provide an accurate picture of the following: 1) background and history of Black Americans (e.g., slavery, emancipation, culture, accomplishments, family context, the Black family's position in American society); 2) the nature of the present assessment process including the recommendation of appropriate assessment procedures; 3) appropriate teaching resources and strategies; and 4) information regarding the effects of negative attitudes and lowered expectations on the behavior and performance of Black children and their families. Of course, in order to adopt such a modification of the present personnel preparation system, the various institutions themselves (institutions of higher education, state and local

education agencies, and agencies in the private sector) would have to first support such changes. Although the focal group being written about is Black Americans, such changes in the personnel preparation system should reflect the existence of a multiethnic society.

Also related to personnel preparation is the need to strengthen services to the exceptional Black child through the preparation of more Blacks in fields such as psychology, medicine, communications (speech and language), social work and early childhood/special education. In moving toward this goal, Blacks should be actively sought and recruited not only for training but for service as well. This need is one also voiced by minority leaders who administer early childhood programs in the Handicapped Children's Early Education Program network (Issues of Common Concern, 1979). Not only are more Blacks needed in these professions, but the field should have a diversity of minority talent.

There are national Black organizations representing the respective professions of psychology, social work, sociology, education and nursing. It is recommended that these organizations become more explicitly involved in the issues that relate to providing services to young Black exceptional children and their families.

Finally, in instances where the teaching staff is limited and where it is difficult to identify staff members who are sensitive to the needs and cultural uniqueness of the population being served, training programs to prepare minority paraprofessionals are in urgent demand. Programs, agencies and groups who can actively move to initiate such programs are encouraged to do so.

Program Reformation

According to Myers (1979) current academic practices tend to suppress

and subordinate cultural differences in the minority child rather than develop and incorporate them into a dynamic, multicultural education process. This is true in regular and special education. There are, however, ways to set about modifying educational practices. Several recommendations have already been cited. In addition, consideration must be given to one other alternative--that of program reformation itself.

Writing about the reformation of early childhood programs that focus on enhancing the competence and encouraging the development of the intellect of Black children, Myers (1979) cites the work of King, Dixon and Wilson (1976) and King (1977). Although their work relates to early childhood compensatory programs, it has much utility for other early childhood, special education endeavors. Instead of compensatory programs based on goals to correct academic deficits in Black children and to better prepare them to fit into the existing social order, they propose an alternative model. In their model the child is viewed as the "central participant in the creation of his/her reality via the initiation of action which begins with full inclusion of his/her way of being in the world in dialectic interactions with the social reality" (King, et al., 1976, p.ii). The child is given the opportunity to use his/her own background and capacity to act upon reality.

Employing such a model, Myers states, would prepare children to be active construers of their concrete reality, preparing them for full "social participation, governance, sharing of power and the transformation of personal and social conditions" (King, et al., 1976, p.111). In such a context, the true educator can use culture as a building block for learning without suppressing or subordinating the child's native cultural forms. When this is done, states Hilliard (1980), special education can

be viewed as helping children achieve the possible rather than adjust to the expected.

CONCLUSION

As with all children, the Black exceptional child should have his or her development appropriately assessed and then be provided an environment that enhances total development. In moving toward this environment, educators, researchers and others must recognize and deal adequately with certain principles basic to the enhancement of education, in general, and special education in particular. These principles, paraphrased from Hilliard (1980), are:

1) The acceptance of the reality of culture.

2) The acceptance of the reality of oppression.

3) The acceptance of the meaninglessness of minority as a term for group identification -- a term that ignores differences that exist within a given race of people.

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Appendices

APPENDIX A
RESOURCES FOR AND AND ABOUT BLACK CHILDREN AND BLACK AMERICANS

The list of books and background readings below was compiled by Marjorie Lee and annotated by Helen Shapira of the ERIC Clearinghouse on Early Childhood Education (ERIC/ECE), Urbana, Illinois. The list has been amended for this book. The compilation is a few years old, so some of the latest work in this area is not listed.

SUGGESTED BOOKS FOR YOUNG CHILDREN (ages 4-8 yrs.)

Abby by Jeannette Caines. Harper & Row, Publishers, New York, 1973.

Through asking questions of her mother and brother, Abby begins to understand some things about her adoption and about her identity as a girl. Her mother and brother respond with great love and judgment to her inquiries.

Adam's World: San Francisco by Kathleen Fraser & Miriam F. Levy. Albert Whitman & Co., Chicago, 1971.

Though providing information about the city of San Francisco, this book really focuses on pride of identity and family relationships. Adam's daddy is a merchant sailor who returns from a trip with some beautiful African cloth. Adam's Momma sews clothes for all the family and they enjoy their African look at a street fair with all their neighbors.

The Boy Who Didn't Believe in Spring by Lucille Clifton. E.P. Dutton & Co., Inc., New York, 1973.

King Shabazz sets out through the city streets with his friend, Tony Polito, to find Spring, which everyone says is coming soon. After searching through the city streets and byways they find Spring in their own neighborhood.

Colors Around Me by Vivian Church. Afro-Am Publishing Co., Chicago, 1971.

A short, vividly illustrated index of different shades of 'blackness,' ending with the idea that all kinds of black are beautiful.

Did the Sun Shine Before You Were Born? by Sol Gordon & Judith Gordon. The Third Press, New York, 1974.

Written to be read aloud by a parent to a child, this book focuses on reproduction within the context of family. A wide variety of families are shown to illustrate differences in lifestyle and cultures.

Doctor Shawn by Petronella Breinburg. Thomas Y. Crowell Co., New York, 1974.

While their mom is out doing her Saturday shopping, Shawn, his sisters, their friend and their cat convert their apartment into a make-believe hospital. Their mom had asked them not to make a mess while she was gone, and her response to their ingenuity reveals a loving, appreciative relationship.

Don't You Remember? by Lucille Clifton. E.P. Dutton & Co., Inc., New York, 1973.

A four-year-old girl remembers everything except her birthday and her family seems not to remember anything. The satisfying conclusion evokes a feeling of love and appreciation within the family as they celebrate her birthday.

El nino que no creia en la primavera by Lucille Clifton. 1973.

(Spanish version of The Boy Who Didn't Believe in Spring)

Martin Luther King, Jr.: A Picture Story by Margaret Boone-Jones. Children's Press, Chicago, 1968.

A biography of Martin Luther King focusing on his childhood. His life and ideas are briefly retold in a style suitable for young children.

The Legend of Africania by Dorothy W. Robinson. Johnson Publishing Co., Chicago, 1974.

In rich, poetic language, the fable of Africania, a black woman, and Uhura, the prince of Africa, makes a strong statement for preserving the ethnic and historical identity of all peoples who have been oppressed.

Ray Charles by Sharon Bell Mathis. Thomas Y. Crowell Co., New York, 1973.

This biography of Ray Charles relates how his intelligence, determination and self-reliance helped him overcome the limitations of his blindness and achieve greatness as a musician.

Ronnie by Eileen Rosenbaum. Parents' Magazine Press, New York, 1969.

The excitement and uncertainty of a surprise trip with his dad are reflected in the thoughts and captured in the photographs of an energetic and inquisitive boy.

Rosa Parks by Eloise Greenfield. Thomas Y. Crowell Co., New York, 1973.

A moving account of the life of Rosa Parks, the woman who refused to move to the back of the bus and thereby helped to instigate the modern movement for civil rights among Blacks in this country.

Walk Home Tired, Billy Jenkins by Ianthe Thomas. Harper & Row, Publishers, New York, 1974.

Billy is too tired to walk home from the playground, but his big sister, Nina, makes the walk home such an adventure that he is home before he knows it.

What Color Are You? by Darwin Walton. Johnson Publishing Co., Inc., Chicago, 1971.

In clear text, accompanied by photographs, this book explores how all people are alike, gives a historical explanation of the development of different skin colors, discusses the function of skin, and the irrelevance of skin color to what goes on inside a person.

Where Does the Day Go? by Walter M. Myers. Parents' Magazine Press, New York, 1969.

A father, walking in the park with his son and some other children, helps the children satisfy their curiosity about day and night. In doing so, he points out how people, like day and night, may seem different, but are similar in important ways.

Black Publishers of Children's Books and Other Educational Materials

Afro-Am Publishing Co.
910 South Michigan Avenue
Suite 556
Chicago, IL 60605
(312) 922-1147

Associated Publishers
Association for the Study of Negro Life and History
1401 14th Street, NW
Washington, DC 20005
(202) 667-2822

Johnson Publishing Co., Inc.
820 South Michigan Avenue
Chicago, IL 60605
(312) 322-9200

Third Press International
1995 Broadway
New York, NY 10023
(212) 724-9505

Third World Press
7524 S. Cottage Grove
Chicago, IL 60619
(312) 651-0700

SUGGESTED BACKGROUND READINGS FOR TEACHERS AND OTHERS

Child Development

The Black Child: A Parent's Guide by Phyllis Harrison-Ross & Barbara Wyden. Peter H. Wyden, Inc., New York, 1973.

Black Child Care by James P. Comer & Alvin F. Poussaint. Simon & Schuster, New York, 1975.

Children of Crisis by Robert Coles. Dell Publishing Co., New York, 1967.

Race Awareness in Young Children by Mary Ellen Goodman. Collier-Macmillan, Ltd., New York, 1964.

History and Culture

An American Traveler's Guide to Black History by Phillip T. Drotning. Doubleday & Co., Inc., New York, 1968.

Before the Mayflower by Lerone Bennett, Jr. Penguin Books, New York, 1966.

The Black Americans by C. Eric Lincoln. Bantam Pathfinder Books, New York, 1969.

From Slavery to Freedom 3rd ed. by John H. Franklin. Vintage Books, Random House, New York, 1969.

The Negro Pilgrimage in America by Charles E. Lincoln. Bantam Pathfinder Books, New York, 1969.

About Being Black

Autobiography of Malcolm X by Alex Haley. Grove Press, New York, 1964.

Death at an Early Age by Jonthan Kozol. Bantam Books, New York, 1968.

The Declining Significance of Race by William J. Wilson. University of Chicago Press, 1980.

Roots: The Saga of an American Family by Alex Haley. Doubleday & Co., Inc., New York, 1976.

Thirty-six Children by Herbert Kohl. New American Library, New York, 1968.

Publications on Children's Literature from a Black Perspective

**Image of the Black in Children's Fiction by Dorothy Broderick. R.R. Bowker Co., New York, 1973.

**"In House and Out House: Authenticity and the Black Experience in Children's Books," School Library Journal, October 1970.

**Interracial Books for Children. The Council on Interracial Books for Children, New York.

Regular in-depth studies of racism against Black Americans in children's "classics" and in new "interracial" books (some excerpted in Interracial Digest, available from the Council).

**Starting Out Right: Choosing Books about Black People for Young Children, Pre-School through Third Grade. Wisconsin Department of Public Instruction, Madison, WI.

Activity Books and Periodicals

A Black Studies Curriculum for Early Childhood Education: Teaching Units. (Revised Edition) Prepared by the Black Studies Curriculum Development Project under the direction of Bernard Spodek. ERIC/ECE Publications Department, University of Illinois at Urbana, 1976.

Ebony Jr. Johnson Publishing Company, Chicago.

A bimonthly activity magazine for and about Black Americans. For Kindergarten--Primary Grades.

Pride: A Handbook of Black Studies Techniques for the Classroom Teacher by Clifford D. Watson. Stevensville, MI: Educational Service, Inc., 1971.

Soul Food Cookbook by Jim Harwood and Ed Callahan. Nitty Gritty Productions, Concord, California, 1969.

Periodicals

Black Scholar: Journal of Black Studies and Research. The Black World Foundation, San Francisco.

A monthly journal (except July and August).

Black Sports. Black Sports, Inc., New York.

A monthly magazine about Blacks in the various American and international sports activities.

** From a 1975 list developed by the Council on Interracial Books for Children, 1841 Broadway, New York, NY 10023.

Ebony. Johnson Publishing Company, Chicago.

A monthly magazine which reports on many viewpoints and aspects of Blackness in America and other countries.

Essence: The Magazine for Today's Black Woman. Essence Communications, Inc., New York.

A monthly magazine on topics such as current issues, history, trends, fashion, beauty and careers (from a black woman's perspective).

First World. First World Foundation, Atlanta.

A bimonthly journal devoted to discussion of issues concerning Black people, commentaries, essays, fiction, poetry, plays, and cartoons by well-established and new artists and thinkers.

Bibliographies

Cultural Awareness: A Resource Bibliography by Velma E. Schmidt and Earldene McNeill, 1978. The National Association for the Education of Young Children, Washington, DC.

This bibliography contains a section on resources for Black Americans. The contents include:

- Books for Children.
- Resources for Adults--books and articles, bibliographies, catalogs, periodicals.
- Materials and Experiences--posters/pictures, records, films/filmstrips, slides, dolls, museums.

Multicultural Bibliography for Pre-School through Second Grade by Margaret S. Nichols and Peggy O'Neil, 1972. Multicultural Resources, Stanford, CA.

This document cites picture books, stories, posters, and bibliographies for Black as well as other minority children.

Multi-Ethnic Reading and Audio-Visual Materials for Young Children: Annotated Bibliography, 1972. Day Care and Child Development Council, Washington, DC.

This resource lists reading and visual materials for young Black children and other ethnic backgrounds.

APPENDIX B
RESOURCE AGENCIES

1. National Black Child Development Institute (NBCDI)
   1463 Rhode Island Avenue, N.W.
   Washington, DC 20005

   NBCDI is a nonprofit independent national organization composed of persons concerned about preserving the well-being of Black children and families. It monitors legislation and policies which affect Black children and their families.

   The organization has several publications, six of which are listed below:

   Black Child Advocate. This newsletter contains position papers and articles on federal legislation, community action groups, conferences, research relating to Black children and also information about the activities of the institute. It is published ten times a year.

   Black Children Just Keep on Growing. Madeleine Coleman, Editor. This book presents ten program models designed by Black people for Black children. The programs are designed to draw upon the strengths of Black heritage and family lifestyle, helping the child build a positive sense of his racial identity and self-concept.

   Curriculum Approaches from a Black Perspective. This document is the proceedings of a workshop designed to explore current thoughts on curriculum development for the Black child.

   Black Children and Literature. Margot C. Ellis. This paper presents criteria for evaluating books about Black children. The paper also contains recommended books for children by Black authors and some by white authors as well as a list of objectionable books.

   Guidelines for Research Involving Black Children. Asa Hilliard. As the title suggests, this paper outlines suggested guidelines for research involving Black children.

   A Model for Developing Programs for Black Children. Barbara P. Huell. This document presents a statement of the Black Child Development Institute regarding the development of model education constructs for Black Children. It also provides a bibliography of fifty basic books pertaining to Blacks in America.

2. National Council for Black Family and Child Development (NCBFCD)
   Dr. Jay Chunn - President
   Dean of the School of Social Work
   Howard University
   Washington, DC 20059

   NCBFCD is an organization which advocates for Black children and youth, their families, and their communities. It was founded in 1972 in Washington. Its scope is national.

Its goal for the next two years is to assess the condition of the Black child and family in America and to call for corrective actions to improve the situation.

The organization is involved in research, publications, and legislative advocacy.

3. Black Caucus of Special Educators
Council for Exceptional Children (CEC)
1920 Association Drive
Reston, VA 22091

The purposes of this subgroup within CEC have been stated as follows:

1) To become persistent advocates for the rights to appropriate services for Black exceptional children.

2) To form bonds with all professional groups and organizations mutually concerned with the education of Black exceptional children.

3) To provide a mechanism for the location of employment opportunities for Black special educators and a method of referring them.

4) To provide strong support for minority group committees within the Council for Exceptional Children.

5) To encourage involvement of Black professionals in the Administrative hierarchy of the parent organization (CEC).

6) To create an awareness of valid concerns and to raise the level of consciousness of the entire CEC organization.